COUNTY COUNCIL OF DURHAM

ANNUAL REPORT of the COUNTY MEDICAL OFFICER OF HEALTH CHIEF WELFARE OFFICER AND PRINCIPAL SCHOOL MEDICAL OFFICER

STANLEY LUDKIN, M.D., B.S., D.P.H.

for the YEAR 1966

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Health Department,
County Hall,
Durham.

August, 1966.

Madam Chairman, Ladies and Gentlemen,

I have the honour to present the first combined health, welfare and school health service report for the Administrative County for the year 1966. The reports have been combined in this manner in order to give a more comprehensive picture of the work carried out without separating arbitrarily the work and responsibilities of members of the staff engaged on mixed duties.

Comments on the various services have been made under each section and, as far as possible, statistical data has been eliminated from the text of the report, being provided in detail in a separate section. While details of the health and welfare services in the " Excepted" districts of Easington and Stockton are included in Part I of my report, reports on the school health service in these latter districts are separate in Parts IV and V.

The health in the County continued to be satisfactory and it is pleasing to report new low record rates for stillbirths, early neo-natal deaths and for infant and perinatal mortality. Unfortunately, death rates from cancer (all forms) and particularly cancer of the lung, rose to a new record level during 1966,

Liaison with hospital medical staff and medical social workers continued throughout the year, both prior to admission and in follow-up after admission of patients. Further co-operation with the E.N.T. specialists and the Organiser for Deaf Education was achieved during the year in the management of pre-school deaf children. The diagnosis and training of these deaf children was thus commenced earlier.

Health visitors and midwives continued to visit general practitioners for discussions on particular patients and attended special sessions at the surgeries.

Although the scheme to combine maternity and child welfare and school health duties is limited by the shortage of medical staff, it has proved possible to arrange for another two clinical medical officers in the north eastern part of the County to undertake the full range of child care duties. In the future, comprehensive responsibilities in this field will be given to clinical medical officers wherever possible.

During the year there was a rapid development of the chiropody service with increased staff and the bringing into use of a mobile clinic.

There were considerable increases in the staffing of the social welfare and mental health sections. During the year four social workers, five mental welfare officers and eight members of the staff of junior and adult training centres were seconded for training purposes. It is possible to report that for the first time there was no waiting list for admission to junior or adult training centres at the end of the year.

The establishment and development of the health education section has enabled us to plan programmes in clinics and in-service training schemes and to improve liaison with the Education Department regarding health education projects in schools.

Following the introduction in 1965 of cervical cytology clinics, this service was extended during 1966 and we are now able to offer appointments to women who wish to undergo this test. This service has been regularly publicised during the year.

I regret to report the death in June, 1966 of Dr. J. T. W. Reid, Deputy Principal School Medical Officer. Dr. Reid was appointed to this post in 1960 and since this date worked conscientiously to ensure the efficient running of the School Health Department. He had been in ill health for some little time before his death although it was a great shock to all his friends and colleagues when this occurred.

I wish to thank the members of my staff for their continued assistance and co-operation throughout the year. Because of developing services, many additional demands have been made on them, but I am most grateful for the way they have responded.

Finally, to the Chairmen, Vice-Chairmen and members of the Health and Education Committees and Sub-Committees, I must express my appreciation of the support and help given to me so readily and consistently throughout the year.

Your obedient servant,

STANLEY LUDKIN,
County Medical Officer.

STAFF OF THE COUNTY HEALTH DEPARTMENT

County Medical Officer of Health
Stanley Ludkin, M.D., B.S., D.P.H.

Deputy County Medical Officer of Health
R. G. Hendry, M.B., Ch.B., D.P.H., D.Obst., R.C.O.G.

Deputy Principal School Medical Officer
J. T. W. Reid, M.B., Ch.B., D.P.H. (until 26.6.66).

Principal Senior Medical Officers
Administration—A. D. Bostock, M.B., Ch.B., D.P.H.
Geriatrics—M. A. Loraine, B.Sc., M.B., Ch.B., D.C.H., D.P.H. (from 1.7.66).

Senior Medical Officer (Maternity and Child Welfare)
E. M. Osborne, M.B., Ch.B., D.P.H., D.C.H., D.Obst., R.C.O.G.

Assistant to Deputy Principal School Medical Officer
W. E. Rigby, M.B., Ch.B.

Clinical Medical Officers
K. W. Balut, M.B., Ch.B.
L. R. Benham, M.B., B.S., D.P.H. (part-time).
I. E. Brown, M.B., B.Ch., B.A.O. (part-time).
F. G. Carr, M.B., Ch.B. (until 31.12.66)
R. C. Carr, M.B., B.S. (from 1.4.66).
W. J. Coates, M.B., Ch.B., D.Obst., R.C.O.G. (part-time).
M. M. Copland, M.B., Ch.B.
M. T. Cunningham, M.B., B.S.
J. Dabrowska, M.B., Ch.B. (part-time).
M. M. Dickinson, M.R.C.S., L.R.C.P.
A. J. Edwards, M.B., Ch.B.
J. T. Eustace, M.D., B.Ch., B.A.O., M.R.C.P.I.
D. D. Field, M.B., Ch.B., M.R.C.S., L.R.C.P.
E. S. Gillespie, M.B., Ch.B. (part-time).
J. M. Hegarty, M.B., B.Ch., B.A.O., D.P.H. (part-time)
M. B. Griffith, M.B., Ch.B. (until 2.4.66)
W. E. Hutchinson, M.D., B.Ch., D.P.H. (temporary).
S. Jindal, M.S., M.B., B.S.
G. A. Macgregor, M.D., D.P.H. (part-time).
A. R. McNaughton, M.B., Ch.B.
D. D. Nichol, M.B., B.S., B.Hy., D.P.H.
D. P. Pick, M.B., Ch.B.
M. W. Rodgers, M.B., B.Ch., B.A.O., D.P.H. (part-time).
L. Ross, M.B., B.S.
W. H. Skinner, L.R.C.P., L.R.C.S., L.R.F.P.S.
L. Smith, M.B., B.S., D.R.C.O.G.
K. M. Stevens, M.B., B.S.
H. W. Tonge, M.B., Ch.B. (part-time).
A. Wagg, M.B., B.S.
W. Welsh, L.R.C.P., L.R.C.S., L.R.F.P.S.
A. S. M. Wilson, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (part-time).
M. A. Wynne, M.B., B.S.

Assistant County Medical Officers

Area No. 1.	J. A. Dryden, M.A., B.Sc., M.B., B.Chir., D.P.H., D.I.H.
Area No. 2.	H. C. Weir, M.A., M.B., B.Ch., B.A.O., D.P.H.,
Area No. 3.	R. Hill, M.B., B.Ch., D.P.H.
Area No. 4.	J. L. Siddle, M.B., B.S., D.P.H.
Area No. 5.	P. A. Y. Narayanan, M.B., B.S., D.T.M. & H., D.P.H.
Area No. 6.	G. A. Macgregor, M.D., D.P.H.
Area No. 7.	R. G. Drummond, M.B., Ch.B., D.P.H.
Area No. 8.	A. S. M. Wilson, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.
Area No. 9.	J. M. Hegarty, M.B., B.Ch., B.A.O., D.P.H.
Area No. 10.	M. W. Rodgers, M.B., B.Ch., B.A.O., D.P.H.

Medical Officers of Health—Delegated Authorities

Easington R.D.—J. W. A. Rodgers, M.B., B.Ch., D.P.H.
Stockton M.B.—H. J. Peters, M.B., B.Hy., D.P.H., D.P.A.

Consultant Oculists (part-time)

J. Frankenthal, L.R.C.P., L.R.C.S., D.O.
C. R. Kanagasundaram, M.B., B.S., D.O.
H. F. Lake, M.B., B.S., D.O.
J. McClemont, M.B., Ch.B., D.O.M.S.
V. G. O'Leary, M.B., B.Ch., B.A.O.
I. R. Robertson, M.B., B.Ch., D.O.
C. J. Sharp, M.B., Ch.B., D.O.

Consultant Paediatricians for Special Schools (Part-time)

J. D. Andrew, M.B., Ch.B., M.R.C.P., D.C.H.—
Windlestone Hall Residential Special School for Delicate Pupils.

Psychiatrists (Part-time)

E. M. Bruce, M.B., B.S., D.P.M.
F. Murray, M.R.C.S., L.R.C.P., D.P.M.
M. Walley, M.B., Ch.B., D.P.M.

Dental Anaesthetists (Whole-time)

F. T. Hardy, M.B., Ch.B.

Consultant Dental Anaesthetists (Part-time)

J. A. Little, M.B., B.S., F.F.A.R.C.S.
G. F. Purves, M.R.C.S., L.R.C.P., M.B., B.Chir. (from 26.10.66)
H. C. Saunders, M.B., Ch.B., F.F.A.R.C.S.

Senior Dental Officer

M. M. Lishman, L.D.S., R.C.S.

Dental Officers

J. M. Aynsley, L.D.S., R.C.S. (from 3.1.66 until 30.4.66).
G. D. Bell, L.D.S., R.C.S. (from 3.1.66).
M. Bywater, L.D.S.
P. Chapman, B.D.S.
J. N. Cairncross, L.D.S., R.F.D.S.
R. M. Castledine, B.D.S.
J. K. Christie, L.D.S.
N. A. Eddy, B.D.S.
E. M. Earp, B.D.S. (until 31.8.66)

R. B. Hartford, B.D.S. (until 30.11.66).
M. Hay, L.D.S.
J. G. Hillery, B.D.S. (until 28.2.66).
W. C. Hodge, L.D.S. (whole-time until 31.5.66, part-time from 1.6.66)
C. P. Hurst, L.D.S.
V. N. Jordan, B.D.S.
C. S. Matthews, B.D.S.
P. M. Maxwell, B.D.S. (until 30.4.66).
M. Melrose, B.D.S. (from 12.9.66).
S. Michael, B.D.S. (whole-time until 31.5.66, part-time from 1.6.66).
A. J. Monroe, L.D.S. (from 14.10.66).
D. A. Newton, B.D.S. (from 5.9.66).
H. Riley, L.D.S.
W. M. Rouse, B.D.S.
M. A. Sainsbury, L.D.S.
D. J. Salway, B.D.S. (from 1.8.66).
K. Strusinska, B.D.S. (from 5.9.66).
D. Walker, B.D.S. (until 1.11.66).
J. H. Wilkinson, B.D.S.

10 Part-time Dental Officers equivalent of 3.7 Whole-time.

County Health Inspector

T. S. Yarrow, C.R.S.H., F.A.P.H.I.

HEALTH VISITING SERVICE

Superintendent

Miss M. Pattison, S.R.N., S.C.M. (Part 1), R.F.N., H.V. Cert., Nursing Administration (Public Health)

2 Deputy Superintendents. 115 Health Visitors.

SCHOOL NURSING SERVICE

27 School Nurses.

MIDWIFERY AND NURSING SERVICES

Superintendent

Miss N. Hawkins, S.R.N., S.C.M., R.F.N., H.V. Cert., Q.I.D.N.

1 Deputy Superintendent. 2 Assistant Superintendents.
105 District Midwives. 23 District Nurse-Midwives.
118 District Nurses.

Chief Nursing Officers

Easington R.D.—Miss A. Howarth, S.R.N., S.C.M., H.V. Cert., Q.N.S.
Stockton M.B.—Miss A. Hansbury, S.R.N., S.C.M., H.V. Cert., Q.I.D.N.

Nurseries

4 Matrons. 33 Other Staff.

MENTAL HEALTH

Executive Officer

J. Wilson, A.A.P.S.W. (from 1.11.66). F. W. S. Taylor, A.A.P.S.W. (until 31.7.66).

21 Mental Welfare Officers.

TRAINING CENTRES FOR THE MENTALLY SUBNORMAL

8 Supervisors, 26 Other Staff — Junior Training Centres.

1 Manager Warden, 5 Superintendents, 28 Other Staff — Adult Training Centres.

DOMESTIC HELP SERVICE

1 Organiser. 19 Assistant Organisers

HANDICAPPED PERSONS

Senior Executive Social Worker
A. B. McManus
1 Senior Social Worker
14 Social Workers 2 Occupational Therapists.

BLIND PERSONS

17 Home Teachers

FAMILY WELFARE

Senior Family Welfare Officer
C. J. Carey.

AMBULANCE SERVICE

Ambulance Officer
C. G. Dewen

3 Staff Officers
13 Central Control Staff.
14 Depot Superintendents.
4 Depot Telephonists.
1 Maintenance Officer.
3 Switchboard Operators.
2 Liaison Officers.
298 Driver-attendants.
4 Mechanics.

WELFARE SERVICES—RESIDENTIAL ACCOMMODATION

Administrative Officer
J. Scott

3 Superintendents. 24 Matrons.
2 Wardens. 418 Other Staff.

PART I

LOCAL HEALTH AND WELFARE AUTHORITY SERVICES

COMMITTEES

The administration of matters affecting public health and of the National Health Service Acts, 1946-1952, and the National Assistance Acts, 1948 and 1951 in so far as they affect the County Council, devolve upon the Health Committee. In connection with the administration of the National Health Service Acts the following standing committees have been established :—

Maternity and Child Welfare.

Ambulances.

Midwifery, Home Nursing, Health Visiting and Domestic Help.

Mental Health.

E. F. Peile County Convalescent Home.

These sub-committees, with the exception of the Mental Health Sub-Committee which meets bi-monthly, have meetings in each month except August. In connection with the administration of the National Assistance Acts there is a standing Welfare Sub-Committee which meets monthly except in August.

AREA HEALTH SUB-COMMITTEES

The number of meetings held by the area health sub-committees during the year in accordance with the scheme adopted by the County Council in 1948 was as follows :—

No. of Area.	Names of County Districts comprised in the area.	Number of members.	Meetings held.
1	Blaydon U.D. Ryton U.D. Whickham U.D.	20	4
2	Jarrow Borough Felling U.D. Hebburn U.D.	21	4
3	Consett U.D. Stanley U.D. Lanchester R.D.	21	4
4	Chester-le-Street U.D. Chester-le-Street R.D.	16	4
5	Boldon U.D. Hetton U.D. Houghton-le-Spring U.D. Seaham U.D. Washington U.D. Sunderland R.D.	29	4
6	Crook and Willington U.D. Tow Law U.D. Weardale R.D.	18	4
7	Durham Borough Brandon U.D. Durham R.D.	20	4
8	Barnard Castle U.D. Barnard Castle R.D.	15	4
9	Bishop Auckland U.D. Shildon U.D. Spennymoor U.D.	20	4
10	Hartlepool Borough Billingham U.D. Darlington R.D. Sedgefield R.D. Stockton R.D.	28	5

SECTION A—GENERAL STATISTICS

Area (in acres)	620,276
Registrar General's estimate of population, mid-1966	981,020
Rateable value as at the 1st April, 1966	£30,454,911
Sum represented by a penny rate	£120,989

LIVE BIRTHS

	1965			1966		
	Males.	*Females.*	*Total.*	*Males.*	*Females.*	*Total.*
Legitimate	8,673	8,059	16,732	8,279	7,882	16,161
Illegitimate	450	419	869	415	421	836
Totals	9,123	8,478	17,601	8,694	8,303	16,997

	Administrative County,			*England and Wales.*
	1964	*1965*	*1966*	*1966*
Live birth rate per 1,000 population	18.3	18.1	17.3	17.7
Illegitimate live births per cent of total live births ...	4.2	4.9	4.9	
Stillbirths	361	339	296	
Stillbirth rate per 1,000 total live and stillbirths... ...	20.0	18.9	17.1	15.4
Total live and stillbirths	18,087	17,940	17,293	
Infant deaths (deaths under 1 year)	406	362	357	
Infant mortality rates :—				
Total infant deaths per 1,000 total live births ...	22.9	20.6	21.0	19.0
Legitimate infant deaths per 1,000 legitimate live births	22.6	20.0	20.9	
Illegitimate infant deaths per 1,000 illegitimate live births	29.4	31.1	23.9	
Neo-natal (deaths under four weeks) mortality rate per 1,000 total live births	15.7	14.1	14.2	12.9
Early neo-natal (deaths under one week) mortality rate per 1,000 total live births.	13.8	12.0	11.6	11.1
Perinatal (stillbirths and deaths under one week combined) mortality rate per 1,000 total live and still births ...	33.5	30.7	28.6	26.3
Maternal deaths (including abortion)	2	4	2	
Maternal mortality rate per 1,000 total live and stillbirths	0.11	0.22	0.12	0.26
Total deaths from all causes	10,563	11,130	11,456	
Death rate per 1,000 population	10.9	11.4	11.7	11.7

AREA.

The area of the administrative county is 620,276 acres—143,044 in municipal boroughs and urban districts and 477,232 in rural districts—the mean density of population being 1.58 persons per acre.

The administrative county consists of four municipal boroughs, 21 urban districts and 10 rural districts. The area of each of these districts is given in Table 1, Part III.

POPULATION.

The Registrar General's estimate of population for the administrative county for mid-year 1966 is 981,020 and shows an increase of 6,160 compared with his estimate for mid-year 1965. The estimated population of each sanitary district in the administrative county is also given in Table 1.

Births and Birth-Rates.

The adjusted birth-rate for the administrative county, in accordance with the comparability factor (0.98) supplied by the Registrar General, is 17.0 per 1,000 population. Birth statistics for sanitary districts are shown in Table 1, Part III.

Hospital confinements comprised 71% of the total, the remaining 29% being domiciliary. Details of domiciliary and hospital confinements for the past five years are as follows :—

Year.	Percentage of Total Confinements.	
	Domiciliary.	Hospital.
1962	41	59
1963	39	61
1964	35	65
1965	32	68
1966	29	71

Deaths and Death-Rates.

The adjusted death-rate for the administrative county, in accordance with the comparability factor (1.18) supplied by the Registrar General, is 13.8 per 1,000 population.

The main causes of death in the administrative county were diseases of the heart and circulatory system (50.25%)—of which coronary disease figured prominently (22.39% of total deaths), all forms of cancer (18.32%)—of which 24.24% was due to cancer of the lung, bronchitis (6.60%) and pneumonia (6.36%).

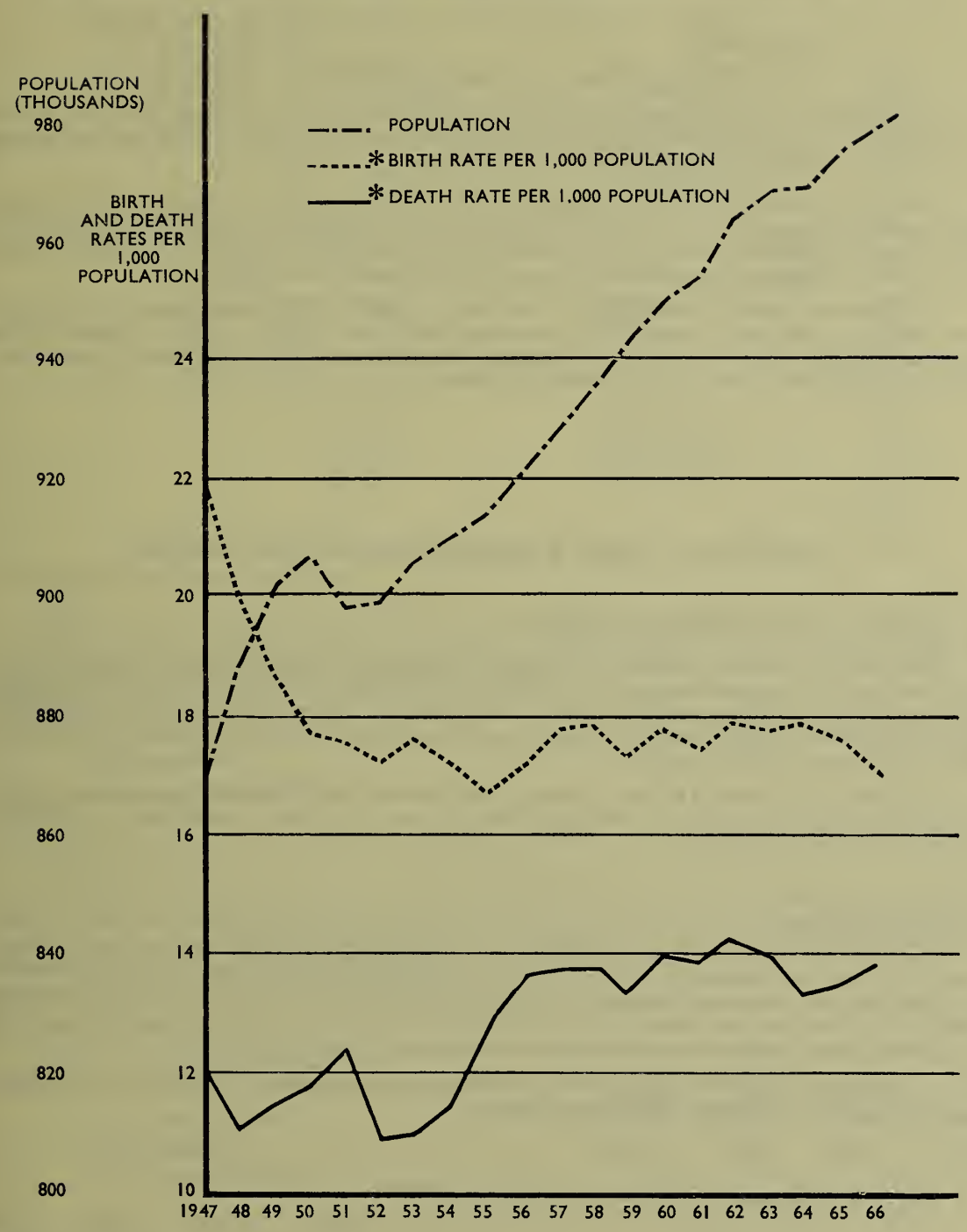
Table 2—Part III gives a comparison of the percentages of deaths in certain age groups from the beginning of the century and further mortality statistics are provided in Tables 1, 3, and 4—Part III.

Infant Mortality.

A comparison of infant mortality statistics for the past ten years is given in Table 5—Part III together with similar comparisons of the rates for perinatal mortality, early neonatal mortality and infant mortality one week to one year. All show a steady decline.

Vital Statistics 1946-66.

The following graph shows comparative population statistics and birth and death rates for the past 21 years.



* CRUDE RATES 1947—1954
RATES ADJUSTED BY COMPARABILITY FACTOR 1955—1966

SECTION 21—HEALTH CENTRES

The two Health Centres at Peterlee and Stockton continued to operate satisfactorily during the year. As reported in my 1965 report, work commenced on the Health Centre on the Leam Lane Estate, Felling, early in 1966 and was continuing satisfactorily at the end of the year.

Plans for the Health Centre on a site adjacent to the swimming-baths at Dunston Bank, Dunston, were almost complete at the end of the year and discussions were taking place regarding the provision of a Health Centre at Hetton-le-Hole and the adaptation of existing maternity and child welfare and school clinic premises at Boldon to form a Health Centre during the financial year 1967/68.

It has been the County Council policy for some time to establish full Health Centres wherever these could provide a more comprehensive and co-ordinated health and welfare service for members of the community, and the Health Committee are prepared to consider such provision wherever general practitioners are interested in working from combined premises.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

A. Maternity and Child Welfare Centres.

Three new centres were opened during the year, at Washington, Bowburn and East Herrington and the scope and variety of work undertaken in the centres is still expanding. With chiropody, mothercraft classes, sessions for the early ascertainment of deafness, health education classes and cervical cytology besides the routine child welfare, family planning and where necessary ante-natal clinics, there is rarely a vacant session in the clinics, even in the evenings.

The mobile clinic intended for use in the more rural areas and small villages has been used on a number of trial runs during the year, and a list is being finalized of areas which can be suitably served by the clinic when it comes into full service.

1. *Ante-natal Clinics.*

The number of expectant mothers attending the local authority clinics for their ante-natal care continued to decline, and the number of centres at which ante-natal sessions were held (17) was eight less than in the previous year. As reported last year this is the anticipated trend as more and more general practitioners institute their own ante-natal clinics. Free use of local authority clinic premises was offered to general practitioners for this purpose, and this facility was continued to be used in one area.

In areas where attendances do not justify a regular specific local authority session for this work, expectant mothers were seen during infant welfare sessions.

Details of attendances for the past four years are as follows :—

	1963	1964	1965	1966
No. on clinic register	1,895	1,721	1,457	1,253
Total attendances	7,665	6,947	6,065	5,191
Average attendance per session	5	5	5	5

The following analysis relates to the 1,253 expectant mothers who attended the ante-natal clinics :—

Duration of pregnancy at time of first attendance.

Under 3 months	...	260
3-6 months	...	708
6-9 months	...	285
	Total	1,253

Age of patients.

Under 20 years	...	125
20-25 years	...	508
26-30 years	...	335
31-35 years	...	180
36-40 years	...	88
41+ years	...	17
	Total	1,253

Parity.

0	384	5	21
1	397	6	14
2	207	7	8
3	136	8	1
4	79	9+	6
			1,253

Place of confinement.

Hospital	...	522
Home	...	263
		785
Left district	...	41
Not yet delivered	...	409
Not pregnant	...	18
		1,253

2. *Mothercraft and Relaxation Classes.*

A further course of instruction of staff in teaching exercises for expectant mothers was held in 1966.

This enabled us to extend this activity and classes were held at forty-four welfare centres. Details of the attendances compared with previous years were as follows:—

	1963	1964	1965	1966
Mothers attending	505	729	955	1,331
Total attendances	2,716	4,056	4,499	7,231
Average attendance/session	5	8	6	5

4. *Post-Natal Clinics.*

Examination of mothers six weeks after confinement was carried out at welfare centres either at special sessions when advice on family planning is also available or at one of the other welfare centre sessions. The post-natal clinics held at twelve centres were attended by 138 mothers on 181 occasions and 79 examinations were carried out at other sessions.

5. *Child Welfare Clinics.*

Details of the attendances were:—

	1963	1964	1965	1966
No. on clinic registers	29,309	32,528	35,280	36,137
Total attendances	145,861	162,099	169,507	172,845
Average attendance/session	24	26	27	24

6. *Mothers' Clubs.*

With the advice and help of the health visitors a number of these clubs are now being run by groups of mothers in the county. During the year one club was closed and there are now seventeen of them being held either fortnightly or monthly in welfare centres.

7. *Health Visitor Sessions.*

The success of these sessions at which the screening tests of hearing are carried out continues. It is often valuable for health visitors to be able to arrange to see mothers by appointment at these sessions where more time can be taken to discuss family problems and the care of the children. The total attendances at these sessions was 8,885 the average per session being six. More and more sessions are also being held in General Medical Practitioners' surgeries.

8. *Birth Control Clinics.*

Advice on family planning was sought by 1,103 mothers at special sessions held in twenty-one centres. The total attendances for 1966 was 2,638 compared with 2,731 in 1965. In accordance with Ministry of Health Circular 5/66 assistance has been given to the Family Planning Association in the setting up of two additional clinics in maternity and child welfare centres.

9. *Artificial Sunlight Clinics.*

The number of centres where these sessions were held was 14 at the end of the year. The total of attendances was 3,522 and the following compares the figures for 1966 with those of previous years.

	1963	1964	1965	1966
Patients treated	711	528	385	316
Total attendances	8,693	5,736	4,392	3,522
Number of sessions	1,725	1,582	1,545	887
Average attendance/session	5	4	3	4

10. " *At Risk*" *Register and Congenital Malformations.*

In an attempt to ensure that there is the earliest possible ascertainment of physical or mental defects of the newly born child, a list is kept of those children where pre-disposing factors existed in the ante-natal and post-natal periods. These children are seen routinely at intervals after delivery.

At the end of the year there we 3,860 names on this register, compared with 4,128 at the end of 1965.

Arrangements continued for the notification to the Ministry of Health of congenital malformations apparent at birth.

Cases normally resident outside the county area are investigated and the the relevant information forwarded to the appropriate local health authority. Similar arrangements are in being for cases occurring outside the administrative county area. During the year 252 cases were added to the County Council register and appropriate notifications forwarded to the Registrar General. Notifications were also forwarded in respect of congenital malformations found in 42 stillborn children.

Together with those other children whose names are on the "at risk" register, these infants are visited regularly and advice given to parents.

11. *Welfare Foods.*

Members of voluntary committees continued to make a valuable contribution to the work of the department by accepting responsibility for the distribution of welfare foods at 69 centres. National dried milk and vitamin preparations were obtainable from 132 centres including all child welfare clinics and 32 other premises.

The following statement shows the amounts issued during the year together with comparative figures for 1964 and 1965:—

	1964	1965	1966
National dried milk (tins)	143,451	139,497	110,030
Orange juice (bottles)	124,906	133,667	148,429
Cod liver oil (bottles)	18,733	18,297	17,761
Vitamin tablets (packets)	9,803	8,464	8,202

B. Dental Treatment of Mothers and Young Children.

Treatment for the priority dental service was carried out at 18 permanent clinics and 8 mobile dental vans.

During 1966 there was a reduction in the number of mothers and young children coming to the clinics for treatment. The number of fillings for mothers alone has increased and the number of extractions has decreased which fortunately means that the mothers who are coming to the clinics are coming before their teeth are so carious that the only treatment possible is extraction.

As far as pre schoolchildren are concerned the number of fillings has increased by 64 and extractions have increased by 10 only, therefore it would appear that the dental treatment of pre schoolchildren continues to improve.

The numbers of pre schoolchildren attending clinics is of some concern however, and methods of increasing the attendance to 1/11th of that of the School Dental Service advised by the Ministry of Health are being investigated. It is hoped that it will be possible to introduce these measures during 1967.

Attendance figures for 1966 were:—

	Mothers.	Children.
First visits	104	306
Subsequent visits	156	219
Total visits	260	525
Additional courses of treatment commenced	1	14
Fillings	145	235
Teeth filled	139	206
Teeth extracted	131	332
General Anaesthetics	16	134
Emergencies	8	42
Patients X-rayed	8	4
Prophylaxis	62	34
Teeth otherwise conserved	—	159
Teeth root filled	—	—
Inlays	—	—
Crowns	—	—
Courses of treatment completed	77	220
Patients supplied with full upper or lower denture (First time)	6	—
Patients supplied with other dentures	7	—
Number of dentures supplied	20	—
First inspections	90	396
Requiring treatment	54	193
Offered treatment	46	197

C. Care of Unmarried Mothers and their Babies.

Unmarried expectant mothers are accommodated in appropriate cases at the County Council's mother and baby home, Smelt House, Howden-le-Wear, where there are 17 beds and 9 cots. The number of expectant mothers admitted during 1966 was 64 and the average length of stay was six weeks before confinement and four weeks after discharge from hospital.

When there were no vacancies at Smelt House and in cases where it was considered advisable that a mother should be accommodated elsewhere, other arrangements were made and for these reasons 34 expectant mothers were admitted to homes outside the county.

D. E. F. Peile Home, Shotley Bridge.

This convalescent home, which is administered by the County Council, has accommodation for nine mothers with infants and 24 children.

During the year further improvements have been made to the accommodation both of staff and residents and a considerable amount of redecoration and refurnishing has been carried out.

Recommendations for convalescence were made by general practitioners, assistant welfare medical officers, health visitors and hospital almoners and 169 mothers, 62 infants and 233 children were admitted during 1966. The average duration of stay was 23 days for mothers, 23 days in the case of infants and 25 days for children.

The E. F. Peile Home is approved by the Ministry of Health for the training of nursery nurses, and three students were under training at the end of the year.

E. Day Nurseries.

The four day nurseries in the county are all approved for training purposes. A total of 205 places are available and details of the accommodation and average attendance at each establishment were as follows :—

Nursery.	*Number of Places.*	*Average Attendances.*
Haverton Hill	20	13
Hebburn	65	46
Stockton—		
(*a*) Durham Road ...	60	40
(*b*) Norton Road ...	60	40

Information regarding registered nurseries and daily minders is given in Section G.—Page 56

F. County Federation of Voluntary Workers.

Meetings were held on three occasions during the year. These meetings give an opportunity for members to exchange ideas and to hear of the work carried out in the County as a whole. Talks were given on the work of the County Child Welfare Services by the Senior Medical Officer (M. & C.W.), on the Midwifery Service by the Superintendent of Midwifery and Home Nursing and on the work of the Children's Department by the Deputy Children's Officer.

G. Perinatal Mortality.

During the year there were 494 perinatal deaths (still births plus deaths in the first week of life) compared with 551 in 1965.

An investigation first started in 1956 and continued annually in the Stanley and Consett Urban Districts into the circumstances of all still births and early neonatal deaths and including post mortem examinations of the infants has continued. The results of these investigations are reported at meetings of general practitioners, hospital medical staffs and local health authority medical officers in the area. Information on the cause of death, associated avoidable factors, etc. is provided and discussed.

The importance of adequate ante-natal care and proper selection of hospital cases becomes very obvious during these investigations. The co-operative effort between general practitioners, hospital and local health authority services is found to be very beneficial.

H. Prematurity.

The number of premature live births fell in 1966 to 1,202 compared with 1,279 in the previous year. The proportion of all live births which were premature for the two years was 7.1% and 7.3% respectively.

More than half of the infants who died during the first year of life were premature and the majority of these deaths occurred during the first month.

The neonatal mortality rate of premature babies was 128.1 per 1,000 premature live births compared with a rate of 5.6 for mature infants.

Details of premature births according to place of delivery and birth weight are given below :—

Weight at Birth.	Born in Hospital.			Born at home or in a nursing home.					
				Nursed entirely at home or in a nursing home.			Transferred to hospital on or before 28th day.		
	Total Births.	Died within 28 days.	% died.	Total Births.	Died within 28 days.	% died.	Total Births.	Died within 28 days.	% died.
2 lb. 3 oz. or less	49	44	90	3	3	100	7	6	86
2 lb. 3 oz.— 3 lb. 4 oz. ...	73	33	45	1	1	100	8	5	63
3 lb. 4 oz.— 4 lb. 6 oz. ...	199	29	15	9	1	11	19	3	16
4 lb. 6 oz.— 4 lb. 15 oz. ...	226	7	3	18	1	6	22	1	4
4 lb. 15 oz.— 5 lb. 8 oz. ...	452	13	3	90	1	1	26	6	23
Totals ...	999	126	13	121	7	6	82	21	26

Care of Premature Infants Born at Home. Equipment for the home nursing of premature infants, including lined "Sorrento" cots, with mattress, blankets, sheets, hot water bottles, gamgee outfits and "Belcroy" feeders is available at short notice to any midwife who requires it.

There is a special unit for premature infants at both the Richard Murray Hospital, Blackhill, and Dryburn Hospital, Durham, and, if in other areas, institutional treatment is considered desirable the general practitioner arranges admission to a paediatric unit.

An incubator for the transport to hospital of premature babies is kept constantly warmed at the Ambulance Headquarters, Framwellgate Moor, and arrangements are in operation for the use of incubators based at Newcastle upon Tyne, Darlington, Gateshead, South Shields, Sunderland and West Hartlepool Ambulance Depots and at four hospitals in the County area.

I. Maternal Mortality.

The following are details of maternal mortality in the county during the past ten years :—

		Births registered (live and still).	*No. of Maternal deaths.*	*Maternal Mortality Rate. per* 1,000 *births registered.*
1957	...	17,506	7	0.40
1958	...	17,827	8	0.45
1959	...	17,384	6	0.35
1960	...	18,045	6	0.33
1961	...	17,806	5	0.28
1962	...	18,269	6	0.33
1963	...	17,983	4	0.22
1964	...	18,087	2	0.11
1965	...	17,940	4	0.22
1966	...	17,293	2	0.12

One of the maternal deaths occurring during 1966 involved a mother in the 30-39 years age group, the other being in the 40-49 years age group. The deaths were due to ruptured ectopic pregnancy and sub-arachnoid haemorrage respectively, neither of which could be attributed to lack of care during pregnancy or delivery.

SECTION 23—MIDWIFERY

(i) STAFF.

At the end of the year 105 district midwives and 23 district nurse-midwives, who spent approximately half their time on midwifery duties, were employed and relief work was undertaken by three midwives. Difficulties in recruitment resulted in a shortage of staff in certain areas and the services of four midwives were retained beyond normal retirement for this reason.

Car allowances were paid to 89 district midwives who used their own cars on duty.

The following numbers of midwives gave notice of intention to practice in the administrative county during the year :—

District midwives	120
District nurse-midwives	25
Midwives in hospitals	119
Midwives in private practice	11
	275

(ii) CASES.

Although domiciliary confinements continued to decrease, more patients were discharged from hospital before the tenth day, particularly those returning home within 48 hours of delivery. A doctor was present at only 15% of the domiciliary confinements.

	1964		1965		1966	
Domiciliary confinements during the year	6,339	(35%)	5,696	(32%)	4,927	(29%)
Total hospital confinements	12,004	(65%)	12,208	(68%)	12,321	(71%)
Hospital patients discharged before the tenth day	4,847 (40% of hospital deliveries).		5,773 (47% of hospital deliveries).		5,840 (47% of hospital deliveries).	

It is recognised and accepted that if the maternal and perinatal mortality and morbidity rates are to be reduced further, certain expectant mothers belonging to the "high risk" groups should be delivered in hospital, where any complications occurring can be recognised and dealt with without delay. Unfortunately, because of the shortage of hospital maternity beds it is at present quite impossible to achieve this objective. However, greater use is being made of the available beds by discharging selected mothers earlier than the accustomed tenth day.

While this practice can be valuable, it must be done in a controlled way, good co-operation must exist between all sections of the maternity service—and there must be pre-planning, unity of purpose and continuity of care.

In addition to reporting any abnormality in a mother or baby, details about infants considered to be "at risk" were notified to me so that these children could be registered and kept under supervision.

In order to improve the liaison in the domiciliary maternity services midwives continued to attend a number of ante-natal clinics held by general practitioners in their surgeries, and it was possible to make more of these arrangements during the year.

Midwives attended courses on relaxation and mothercraft and continued to put the training into practice at ante-natal and child welfare clinics.

The following gives details of work undertaken during 1966:—

	Doctor not booked.		Doctor booked.		Totals.	Discharges from hospital before 10th day.
	Doctor present at delivery.	Doctor not present at delivery.	Doctor present at delivery.	Doctor not present at delivery.		
District midwives and nurse-midwives...	11	80	719	4,018	4,828	5,840
Midwives in private practice ...	—	—	21	26	47	—
Total	11	80	740	4,044	4,875	5,840

The midwives requisitioned medical help on 1,947 occasions, and the following statement gives particulars as to the reasons for so doing :—

1.	Ante-natal examination—general	52
2.	Ante-natal examination—albuminuria	242
3.	Threatened miscarriage	12
4.	Miscarriage	18
5.	Contracted pelvis, disproportion between child and pelvic outlet	2
6.	Malpresentation	97
7.	Ante-partum haemorrhage	100
8.	Placenta praevia	2
9.	Prolonged or delayed labour, uterine inertia	229
10.	Post-partum haemorrhage	56
11.	Retained or adherent placenta or membranes	40
12.	Ruptured perineum	474
13.	Premature birth	124
14.	Puerperal pyrexia	42
15.	Other conditions of mother	127
16.	Inflammation of child's eyes	35
17.	Congenital malformation	23
18.	Other conditions of baby	157
19.	Stillbirth	6
20.	Neonatal death	5
21.	Other reasons	104

(iii) Courses and Training.

Lectures by senior nursing administrative staff were given to groups of pupil midwives, and domiciliary midwifery training continued under the supervision of ten teaching midwives. All of the 21 pupils were successful in Part II of the examination of the Central Midwives Board.

Post graduate courses were attended by 27 district midwives in accordance with the rule of the Central Midwives Board.

SECTION 24—HEALTH VISITING.

The shortage of staff continued during the year. This meant that health visitors had to be even more selective in their visiting. In some areas where the shortage of staff was most acute an emergency service only was possible. The health visiting staff are to be commended on their willingness to carry out duties in areas other than their own to which they are already heavily committed.

The service given by the health visitor is a family service—an ascertainment, assessment and health educational service—covering all facets of the health and welfare of the family, especially in the case of the expectant and nursing mothers, infants, school children, those suffering from or in contact with cases of tuberculosis, the aged and the mentally sub-normal. Where appropriate other specialist officers were brought in to assist or take over the cases and a close liaison was maintained both centrally and peripherally with all sections of the department and other services. Children "at risk" continued to be supervised with special emphasis on those with congenital abnormality or disability.

The usual enquiries were made during the year regarding stillbirths and the death of children from pneumonia, bronchitis, prematurity and accidents.

The care of the unmarried mother and her child formed a link between the health visitor and moral welfare workers. The Children's Officer continued to notify the whereabouts of children "in care". Attendants at the special area case conferences regarding certain families and intensive home visiting of these families helped in the prevention of family breakup. Voluntary organisations worked with the health visitors and provided material help and in some cases convalescent holidays. This complemented the aid given by statutory bodies.

Health Education.

Health education continued to be a primary duty and was carried out in the home as well as in the form of group discussions in child welfare centres and mothers' clubs. "Mothercraft and Relaxation" classes are now well established and although the response from expectant mothers is not so great in some areas these classes are very popular with those who attend.

" Health Days" were held in a number of centres during the year when certain aspects of positive health were presented to the public by demonstration, talks and films. Talks were also given to various professional and other groups, and to an increasing number of schools. Courses of in-service training for staff continued during the year. Health visitors took advantage of the skilled assistance offered by the Health Education Officer and his section.

Three health visitors continued contact tracing and health education duties in relation to venereal disease.

Screening Tests for Phenylketonuria.

Screening tests were carried out in 16,141 cases. These were two confirmed cases of phenylketonuria during the year both being admitted to hospital for further investigation under the care of Consultant Paediatricians. One child died at the age of seven weeks and the other is now cared for at home but will always need to be on a special diet.

Detection of Hearing Defects in Young Children.

Screening tests of hearing were carried out during the year on children from the age of seven months to five years at the child welfare centres. This service has been extended to all children and is not confined only to children in the "at risk" groups. In some cases tests were carried out in the home.

Immunisation and Vaccination.

Health visitors continued to advise on the immunisation and vaccination of children under five years of age at child welfare centres or by general practitioners. They spent a good deal of time carrying out and assisting in immunisation and vaccination of older groups and the Heaf testing for tuberculosis infection and follow-up of positive school entrants continued during the year.

Tuberculosis.

Liaison with chest physicians continued. Clinic sessions in the Consett area were transferred to the Shotley Bridge Hospital at the end of the year. Health visitors continued to advise tuberculous cases and their families in their own homes. Contacts were advised regarding the spread of infection. Tuberculin testing in chest clinics, schools and in homes in the Durham and Felling areas continued and health visitors assisted with B.C.G. vaccination and follow-up. Advice was given to the tuberculous family and to "domestic helps" working with these families.

The Mentally Sub-Normal.

Visits were made to advise the mentally sub-normal and their families in their own homes. Mental welfare officers and health visitors worked jointly in a number of cases and responsibility for some, both male and female, were taken over by the mental welfare officers.

Health Visitor and General Practitioner Liaison Scheme.

Health visitors made every effort to increase liaison with general practitioners and discussion on cases of mutual interest proved valuable. No two groups of practitioners seek exactly the same type of liaison scheme and this added to the interest in this work during the year. Common ground for discussion was found in the care of the young, the aged and infirm and in community care after discharge from hospital.

Hospital Follow-Up.

Co-operation continued with hospital medical staff and medical social workers. Cases were investigated prior to and following discharge from hospital and advice given on all aspects of care in the community. This service increased during the year. The admission to maternity hospitals on social grounds of ante-natal cases continued following investigations by the health visitors. A change in planning reduced the number of evening visits but these investigations continued to be time consuming because of the number of expectant mothers at work.

The Aged.

Home visits were paid according to need. Health visitors continued to co-operate with statutory bodies and voluntary organisations in the care of the aged at home. Co-operation was maintained with general practitioners and medical social workers and together with the social workers a special follow-up service was provided for the aged whose names were on the waiting list for residential accommodation.

Summary of the Work done by Health Visitors.

The work of the health visitors for 1965 and 1966 is summarised below.

	1965	1966
Maternity and Child Welfare :—		
Ante-Natal First visits	4,563	4,984
Revisits	2,054	2,015
Births First visits	17,465	17,921
Revisits to children under 1 year	46,136	46,255
Revisits to children 1-2 years	34,102	33,932
Revisits to children 2-3 years	32,527	32,559
Revisits to children 3-4 years	29,523	29,251
Revisits to children 4-5 years	33,337	33,792
Revisits to children 5-6 years	93	91
Other visits	5,508	6,009
Total	205,308	206,809
Tuberculosis :—		
First visits	468	505
Revisits	4,700	4,471
Other visits	740	656
Total	5,908	5,632
School Work :—		
School Children (Home visits)	12,516	11,873
School Children (School visits)	1,266	2,083
Total	13,782	13,956
General Health :—		
Visits	5,236	6,357
Mental Subnormality :—		
Visits paid to mentally subnormal persons	5,191	5,087
Aged People :—		
Visits	20,430	22,709
Summary :—		
Number of effective visits	255,855	260,550
Ineffective visits	31,354	37,148
Total number of visits	287,209	297,698
Time (as days) spent on visits (routine, other and ineffective)	13,499	13,505

Staff.

At the end of the year the health visiting staff numbered 115 including three working part-time only. Staffing remained much below establishment during the year.

Health Visitors Training School.

Seven of the eight students in training were successful in obtaining the Health Visitor's Certificate at the first attempt.

The County of Durham Board for the Training of Health Visitors was established in 1925 as there were no facilities for the training of health visitors in any part of the North of England at that time. The approval for training courses was given by the Minister of Health and the co-operation of the Public Health Department of the local authority was sought to provide practical instruction. The standard of the training given is indicated by the success of candidates and 439 student health visitors passed through the training school.

The responsibility for the provision of the approved health visitor training course was transferred from the County of Durham Board to the Education Authority and the course commenced at the Technical College, Durham, in October.

(i) Staff.

In addition to 117 whole-time district nurses on the staff at the end of 1966 there were 23 district nurse-midwives who spent approximately half their time on home nursing duties. A further 39 nurses were employed on relief work during the year.

At the end of the year 92 nurses and 19 nurse-midwives were authorised car users.

(ii) Cases.

The total number of cases dealt with and visits paid by home nurses during 1966 showed little change from the previous year. Of the total case load 51% were over 65 years of age and this group received 61% of the visits paid. Maternal complications requiring the visit of a home nurse showed a considerable decrease.

The " Night Sitters " service for cancer patients in the terminal stages of their illness continues with the financial support of the Marie Curie Memorial Foundation.

Help has continued to be given in the form of grants of money for extra nourishment through the Foundation.

Good liaison between nurses and general practitioners was maintained and there were more contacts with almoners in the care of patients discharged from hospitals.

(iii) Courses and Training.

Student nurses from Shotley Bridge General Hospital, Bishop Auckland General Hospital, Sedgefield General Hospital and Dryburn Hospital accompanied home nurses for observation visits on the district as a part of their training, and lectures on home nursing were given to them and also to student nurses at Sedgefield General Hospital by senior nursing administrative staff.

Eight district nurses were seconded to the training school at Newcastle upon Tyne for district nursing training all of whom were successful in passing the examination.

Home Nursing statistics are given in Table 6—Part III.

SECTION 26—VACCINATION AND IMMUNISATION

DIPHTHERIA, WHOOPING COUGH, TETANUS, POLIOMYELITIS AND SMALLPOX.

Leaflets drawing attention to the need for children to be protected against these diseases and giving details of the facilities available for vaccination and immunisation are sent to parents by post when their children attain the age of three months. Further leaflets are despatched when children are one year old.

The health visitors are supplied with details of the vaccination and immunisation state of children in their areas so that they may, during their routine visiting, encourage parents to take advantage of the facilities. Advice is also given by assistant welfare medical officers and health visitors at child welfare centres.

The vaccinations and immunisations are carried out by the general practitioners at their surgeries and by the assistant welfare medical officers at child welfare centres.

During the year schemes of vaccination and immunisation were undertaken in infant schools in all parts of the County and in junior schools in one area.

Tables 7 and 8, Part III, give details of the numbers of children vaccinated and immunised in the County throughout the year.

SCHEDULE OF VACCINATION AND IMMUNISATION.

The following is the schedule of Vaccination and Immunisation in use in the county.

Age.	Vaccine.	Interval.
3rd month ...	Triple (diphtheria, tetanus and pertussis) ... ... (1st)	4 weeks
4th month ...	Triple (diphtheria, tetanus and pertussis) ... ... (2nd)	
5th month ...	Triple (diphtheria, tetanus and pertussis) ... ... (3rd)	
6th month ...	Poliomyelitis oral ... ... (1st)	4 weeks
7th month ...	Poliomyelitis oral ... ... (2nd)	
8th month ...	Poliomyelitis oral ... ... (3rd)	
12th-24th ...	Smallpox vaccination.	
18th month ...	Triple (diphtheria, tetanus and pertussis) ... ... 1st booster	
5th year ...	Diphtheria and tetanus ... ... 2nd booster Poliomyelitis oral ... ... 1st booster	
9th year ...	Diphtheria and tetanus ... ... 3rd booster Smallpox (re-vaccination)	
11th year ...	B.C.G. (tuberculosis vaccine)	

SECTION 27—AMBULANCE SERVICE

1. Present Arrangements.

The service operates by means of a central control at Framwellgate Moor, Durham City, two subsidiary message receiving centres, 19 ambulance depots, 134 ambulance vehicles and 343 staff.

These are distributed as follows :—

(*a*) *Headquarters and Central Control Staff.*

Ambulance Officer.
3 Staff Officers.
Control Superintendent
Maintenance Officer.
Controller (Operations).
Controller (Planning).
2 Control Room Supervisors.
7 Control Room Assistants.
Telephonist.
3 Switchboard Operators.

(*b*) *Depots.*

	Driving Staff.	*Vehicles.*		*Driving Staff.*	*Vehicles.*
Barnard Castle ...	2	1	New Herrington ...	24	8
Bishop Auckland ...	31	10	Newton Aycliffe... ...	2	1
Chester-le-Street ...	11	7	Seaham	9	6
Consett	12	6	Stanley	29	7
Crook	9	5	St. John's Chapel ...	2	2
Durham	39	12	Stockton	30	12
Fishburn	10	7	Washington	8	6
Hartlepool	5	1	Wheatley Hill	33	10
Hebburn	30	10	Winlaton	10	9
Middleton-in-Teesdale	2	1	Headquarters Pool ...	—	13

(*c*) *Other Staff.*

14 Depot Superintendents. 2 liasion officers. 4 depot telephonists. 4 mechanics.

To ensure that peripheral parts of the county are covered for emergency purposes the County Council has arrangements with the County Boroughs of Darlington, Hartlepool and South Shields, whereby the Borough ambulance services undertake journeys for the County Council a charge being made to the County Council. The charges made are on a mileage basis with a minimum call-out fee in the case of Darlington County Borough. It was decided during the year that all ambulance depots should provide a 24 hour service and this was implemented early in 1967.

2. Work Undertaken in 1966.

Year.	No. of Journeys made.	No. of patients carried.			Total Mileage covered.
		Stretcher cases.	Sitting cases.	Total.	
1965 ...	96,072	51,559	348,467	400,026	2,600,320
1966	96,665	50,415	347,029	397,444	2,624,199
Increase	593	—	—	—	23,879
Decrease ...	—	1,144	1,438	2,582	—

Long Distance Journeys. The following is a statement of long distance journeys undertaken during the year :—

Cumberland	10	Lincolnshire	1
Essex	2	Nottinghamshire	1
Lancashire	5	Yorkshire	60

Totals : Journeys 79
Mileage 12,718

In addition to the long distance journeys undertaken by ambulances, arrangements were made for 163 patients to be transported by rail. Trends and detailed statistics from 1948 are shown in Table 9, Part III.

Twenty-six new ambulances entered the service during the year and orders were placed for four ambulances for delivery during the financial year, 1966/67, and thirty during financial year, 1967/68.

At the end of the year there were 134 vehicles operating, 4 more than at the end of 1965 and 7 below establishment.

	Ambulances Conventional.	*Light Sitting-case vehicles.*
Number of vehicles at beginning of year	65	65
Unserviceable and withdrawn during the year	17	5
New vehicles	5	21
Number of vehicles at end of year	53	81

Four mechanics are employed and operate from repair units located at Crook, Durham and Stanley. Major repairs are carried out at the Central Repair Depot of the Highways and Bridges Committee.

The working week for operational staff was reduced from 42 to 40 hours on the 4th April, 1966.

Work commenced on a much needed new building for the central control to relieve the present congestion in ambulance headquarters.

Casual labour was again recruited to provide temporary driver-attendants during the holiday period of the permanent driving staff.

Liaison was maintained throughout the year with trade union representatives regarding staff working conditions and amenities generally.

The arrangement entered into with the National Coal Board for emergency ambulance cover at week-ends was extended for another year.

The arrangement was continued during the year in conjunction with the Ambulance Services of Newcastle and Northumberland whereby a twice weekly service to and from the Silloth Convalescent Home, Cumberland, was provided by one authority transporting from Newcastle to the Home and back patients residing in the two geographical counties and the North Riding of Yorkshire. Each constituent authority is responsible for conveying its patients to and from Newcastle.

This Authority continues to be responsible for conveying cases of smallpox and suspected smallpox in the geographical counties of Cumberland, Northumberland and Durham and also the northern parts of Westmorland and the North Riding of Yorkshire, as the smallpox hospital for these areas is at Langley Park. All drivers are offered annual revaccination against smallpox and annual arrangements are made for the protected drivers to visit Langley Park Hospital.

SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

I. Tuberculosis.

Existing services operating in the county are as follows :—

A. B.C.G. Vaccination.

Routine vaccination is carried out by the chest physicians at the chest clinics and during the year 1,527 contacts were skin tested and 1,329 vaccinated.

Tuberculin testing and vaccination of all schoolchildren aged 11 years and upwards is arranged by the assistant county medical officers. During the year 11,458 school children were skin tested, 13.7% were found to be tuberculin positive and 9,041 were vaccinated.

194 students attending further education establishments were skin tested 28.35% were positive and 130 vaccinated.

B. Tuberculin Testing of School Entrants.

The tuberculin testing of school entrants to indicate if they have been in contact with a case of tuberculosis was continued. The skin tests are carried out by the health visiting staff one week prior to the scheduled medical examinations the result of the test being read by the school medical officer at the medical examinations. During the year 217 schools were visited, 8,009 children were skin tested and 127 (1.6%) were found to be tuberculin positive and referred to a chest physician for further investigation. Of these three were notified as new cases of tuberculosis.

C. Occupational and Diversional Therapy.

No occupational therapist is directly employed solely for the tuberculous but the staff dealing with the handicapped persons were available during the year. Use was made whenever possible of help which could be obtained from the National Assistance Board, Ministry of Pensions and voluntary agencies such as care committees and the British Red Cross.

D. Incidence and Mortality.

The number of primary notifications of respiratory tuberculosis received during the year was 297 and of non-respiratory tuberculosis 35, compared with 257 and 49 respectively in 1965. (See Tables 10, and 11—Part III). The total notifications for the year (332) show an increase of 26 compared with 1965 and give an incidence rate for all forms of tuberculosis of 0.34 per 1,000 population, the rate for 1965 being 0.31.

Tables 12 and 13—Part III give the number of deaths from respiratory and non-respiratory tuberculosis under relevant age periods and in separate county districts and areas.

The number of deaths from respiratory tuberculosis (78) has increased by ten. There were six deaths from non-respiratory tuberculosis in both 1965 and 1966.

Tables 14 and 15—Part III give details of the incidence of tuberculosis since 1937.

Comparisons of the respiratory tuberculosis death-rate for the years 1962-1966 are shown below :—

Rate per 1,000 *living.*	1962	1963	1964	1965	1966
Municipal Boroughs in the County ...	0.04	0.07	0.05	0.09	0.12
Urban Districts	0.06	0.04	0.07	0.06	0.06
Rural Districts	0.06	0.07	0.06	0.06	0.09
Administrative County	0.06*	0.06*	0.06*	0.07	0.08
England and Wales	0.06	0.06	0.05	0.04	0.04†

* This death-rate of 0.06 per 1,000 population is the lowest on record for this administrative county.

† Provisional.

Over the years, and particularly recently, the character and incidence of tuberculosis has changed, and is still changing considerably. The massive wide spread infections of the past have disappeared and as with many other previously endemic infectious diseases we have now reached the stage of having to deal with sporadic cases or small localised outbreaks. On examination of the statistics it is seen that while the trend found in the country as a whole over the last 20 years is similar to that in this county, rates were originally higher in the county, but decline has been more rapid and they are now similar.

Future duties and responsibilities of a local health authority in attempting the eradication of tuberculosis must include :—

(1) Taking an active part in health education to prevent the spread of tuberculosis.

(2) Being responsible for tracing contacts in consultation with chest physicians, possibly carrying out tuberculin testing in the home.

(3) Making provision for tuberculin testing of school entrants with follow-up of positives and also using them as indicators of a source of infection.

(4) Arranging B.C.G. vaccination of school children in 11 year + age group.

(5) Supervising patients at home when advised to do so by chest physicians or general practitioners.

(6) Carrying out after-care work—extra comforts, nursing appliances, domiciliary nursing and home helps.

(7) Providing diversional or occupational therapy.

To further these ends, health visitors should attend tuberculosis out-patient departments.

II. Venereal Diseases.

The venereal diseases treatment centres are administered by hospital management committees and the figures in Table 16,—Part III, have been compiled from returns submitted by hospitals where such clinics are held, and are in respect of patients from the Administrative County who attended during the year. Patients very often prefer to attend a clinic outside the area in which they live so the incidence of disease in an area may not necessarily follow the pattern of any particular clinic.

Social work was undertaken by three health visitors as a normal part of their duties, and the health visitor appointed by the Sunderland Authority continued to work in parts of the Administrative County and in South Shields, as well as in Sunderland. The following is a summary of the work done during the year:—

Contacts.		Defaulters.		Others.		Total.	
Cases.	Visits.	Cases.	Visits.	Cases.	Visits.	Cases.	Visits.
12	29	18	43	13	17	43	89

III. Cancer.

Table 17 of Part III gives the number of cancer deaths in each sanitary district during 1966 tabulated to show the organs affected together with the sex and age incidence. The following are comparative statistics in respect of total cancer mortality (including lung cancer) for the administrative county and England and Wales for the past ten years.

Year.	Durham County.		England and Wales.	
	Deaths.	Death-rate	Deaths	Death-rate
1957	1,786	1.92	95,645	2.13
1958	1,807	1.93	97,000	2.15
1959	1,921	2.04	98,393	2.17
1960	1,895	1.99	100,169	2.19
1961	1,895	1.98	101,233	2.19
1962	2,002	2.08	102,852	2.20
1963	1,941	2.00	103,810	2.21
1964	1,912	1.97	106,194	2.24
1965	1,980	2.03	107,770	2.26
1966	2,100	2.14	*108,142	2.25

* Provisional.

Cancer of the lung, especially in males, has shown the only real increase in recent years. This is shown in the following mortality rates for the County.

Year.	Deaths.			Total Death-Rate per 1,000 population.
	Males.	Females.	Total.	
1957	290	45	335	0.36
1958	310	59	369	0.39
1959	345	56	401	0.42
1960	320	47	367	0.39
1961	355	47	402	0.42
1962	394	67	461	0.48
1963	405	52	457	0.47
1964	422	58	480	0.49
1965	407	63	470	0.48
1966	449	60	509	0.52

Cervical Cytology

The special weekly sessions for cervical cytology commenced in 1965 were continued in the child welfare centres at Billingham and Hebburn and in the health centres in the Stockton M.B. and Easington R.D. and to meet the demand for the cervical smear tests from other parts of the county clinics were started at Houghton-le-Spring on 19th January, Consett on 8th March and Newton Aycliffe on 11th July.

A large number of requests were received in the early part of the year which led to a rise in the waiting list and for several weeks two sessions a week were held at Houghton-le-Spring in order to reduce the waiting time. By the end of the year the number of requests being received had lessened and at most clinics all outstanding requests had been dealt with.

A total of 8,714 smears was taken during the year of which 54 were positive and these patients were referred to their general practitioners for further investigation and treatment. A number of cases of trichomonas vaginalis infection were detected from the smears and these patients and any in whom abnormalities were noted when the smear was taken were referred to their family doctors.

Since this service was introduced on 4th August, 1965, the number of smears taken was 9,897 and 59 positive cases have been detected.

Detailed statistics are given in Table 18, Part III.

Madam Curie Foundation.

In addition to acting as agents for the " Night Sitter " Service the County Council also acted for the Madam Curie Memorial Foundation in the provision of extra nourishment and clothing for cancer patients.

IV. Nursing Equipment.

A central store of appliances is maintained in the Health Department and a local store of smaller articles of equipment at Hartlepool. Stores are also maintained at Easington and Stockton. Issues are made on the recommendation of a doctor, health visitor, district nurse or almoner. District nurses are notified of all patients in their districts who have equipment on loan and they maintain a general supervision, notifying the Health Department when the equipment is no longer required.

Liaison with almoners of the hospitals receiving patients from the administrative county is maintained. Special attention is given to those cases of paraplegia and no charge is made to them for equipment supplied.

Over 60 different items were provided during the year.

V. Convalescent Homes.

During the year arrangements were made, on medical recommendation, for the admission of 51 county patients to convalescent homes for recuperative holidays as follows :—

The Metcalfe Smith House, Harrogate ...	5	Rose Joicey Home, Whitburn ...	44
Silloth Convalescent Home	2		

In 31 instances the County Council was responsible for the full maintenance charges and in the remaining 20 cases contributions were required from the patients or their families.

Applications from 27 other patients were withdrawn for various reasons.

VI. Health Education.

Having successfully completed the course for the Diploma in Health Education, the Health Education Officer returned to duty in July.

In the latter part of the year consideration was therefore given to the development of this important section and the way it could best be utilised in sponsoring new Health Education projects and maintaining a steady flow of information, publicity material and equipment for existing health, welfare and school health services. The part this section can play in in-service training of Health and Welfare Department staff was also explored.

Of necessity, the activity of the section was limited to a certain extent by the rate the section could develop and enlarge, although the following projects were either initiated or followed through throughout the remainder of the year. The very valuable Health Education work of the health visitors in particular was, of course, maintained at a high level.

The display in the County Council exhibit at the County Show was on the subject "Poliomyelitis" and stressed the value of immunisation. The display consisted of photographic material supplemented by pamphlets. Following the County Show the display was circulated to several child welfare centres. The co-ordination of the distribution of publicity material on Health Education topics began with the distribution to all clinics of posters and pamphlets on immunisation. This coincided with the circulation of the County Show display and was followed by the distribution of anti-smoking material in support of the campaign organised by the Ministry of Health. Posters were displayed in school clinics and child welfare clinics. During November and December publicity material was distributed advocating the need for "Christmas Safety", including the purchase of safe toys and the need for care when decorating homes.

The development of the comprehensive visual aid service is one of the most urgent needs of the Health Education Section. The provision of display boards and lettering materials for all clinics should be completed early in 1967 and this will allow the comprehensive distribution of publicity material on a monthly basis to all clinics in the County. Films, slides and photographs are being increasingly used by health visitors to give talks in clinics, at schools and to the general public. A comprehensive stock of materials is being gradually built up and all members of staff are given instruction in the use of projectors and any other equipment which they may wish to use.

A new edition of the publicity handbook on the County Councils " Health and Welfare Services" has been prepared. The format has been revised to facilitate continuous revision.

VII. Chiropody.

This service, initially provided by voluntary organisations in a limited number of areas of the Administrative County, was accepted as a County Council responsibility on the 27th February, 1963. At that time it was decided that in the first place aged persons and at a later date handicapped persons and expectant mothers would be eligible for free chiropody treatment. A County Council service was therefore started with the employment of full-time chiropodists and the schemes run by voluntary organisations who were employing registered chiropodists were reimbursed the cost of running approved schemes.

Despite continuing difficulty in the recruitment of full-time chiropodists, the chiropody service for the elderly continued to expand with the opening of 18 new clinics using the services of part-time staff. At the end of the year the staff consisted of the chief chiropodist, five full-time senior chiropodists and seven chiropodists working on a sessional basis.

The mobile clinic was in use on an average of four days per week and proved most valuable in providing suitable surgery conditions in places where adequate accommodation could not be obtained. The successful arrangement whereby the clinic was set up outside the wardens' accommodation of a group dwelling scheme for the aged in Rowlands Gill was also put into operation at Chopwell with the co-operation of Blaydon Urban District Council.

At present the County Council is financing 49 schemes run by voluntary organisations, many of whom experienced an increasing demand for treatment and were able to hold extra treatment sessions. Equipment, which includes chiropodist chair, dressings trolley and angle poise lamp is loaned free of charge to schemes holding frequent regular sessions and items were issued to a number of new schemes.

The total number of treatments given in 1966 was 54, 812, compared with 41,692 in the previous year.

The following statistics show the extent of the service given during the year.:—

	Direct Service.	*Voluntary Organi-sations.*	*Stockton M.B.*	*Easington R.D.*	*Total.*
Chief Chiropodists	1	Nil	Nil	Nil	1
Chiropodists (whole-time)	3	Nil	1	1	5
Chiropodists (part-time)	7	12	Nil	Nil	19
Treatment Centres	46	49	2	9	106
Persons Treated :—					
(*a*) Elderly	3,764	6,629	516	772	11,681
(*b*) Handicapped	Nil	27	Nil	Nil	27
Treatments :—					
(*a*) Elderly	14,739	28,027	3,224	4,111	50,101
(*b*) Handicapped	Nil	109	Nil	Nil	109

In addition, 804 residents in hostels for the elderly were given 4,602 treatments.

During 1966, grants amounting to £8,308. 19s. 7d. were made to voluntary organisations.

VIII. Provision of Incontinence Pads.

The demand for disposable incontinence pads increased markedly during the year as the service became more widely known and the number of pads issued was 112,208, compared with 43,852 in 1965.

Although several District Councils arranged for disposal of soiled pads when this creates a problem—for instance, in houses without an open fire or other solid fuel appliance—no serious difficulty has been experienced so far, and in the majority of cases they are burnt in the domestic grate.

SECTION 29—DOMESTIC HELP SERVICE

The demand for the service showed a further increase in 1966 and a greater number of households were provided with help than previously. The elderly and infirm comprised 85.0% of those receiving assistance and amongst the remainder were 25 families with special problems 13 of whom were still receiving help at the end of the year.

Organisation.

Apart from the delegated areas of Easington and Stockton the County is divided into 17 areas each supervised by an assistant organiser who engages and places the home helps. The assistant organiser investigates applications for help which are received from general practitioners, hospital and local authorities' medical and nursing staff and officers of other statutory and voluntary bodies, and also makes regular visits to the houses where helpers are employed to ascertain any changes in the circumstances and to ensure efficient deployment of staff to assist those with the greatest need.

All assistant organisers are employed full time and are encouraged to undertake the training course organised jointly by the Institute of Home Help Organisers and the N.A.L.G.O. Correspondence Institute. Future applicants for Assistant Organisers posts will be asked to undertake the course.

Talks about the service were given on six occasions.

Home Helps.

The home helps are a body of practical social workers, with experience in running a home, care of the elderly and management of children. They comfort and counsel the people they serve and are encouraged to have a cheerful and optimistic outlook as well as sympathetic understanding of the needs of the elderly. Helpers attending cases of tuberculosis are tuberculin tested and have a chest x-ray when they are assigned to the case and annually thereafter, so long as they are in contact with the disease.

Charges.

The charge for the service was 5/10d. per hour at the end of December but the amount payable was reduced in accordance with the scale of charges which takes into account the ability of the family or individual to pay. 95% of the total cases receive a free service.

Cost.

The estimated cost of the service for the financial year, 1966/67, was £560,000—£570 per 1,000 population. Although costly it is a most valuable community service, frequently making the difference between hostel or hospital admission and independence and continuing life in the community. Its more intangible value of dispelling loneliness, providing advice, support and the early ascertainment of specific needs is beyond question.

The following is a summary of the work accomplished :—

Cases being assisted at 1st January, 1966	6,801
*New cases assisted during the year	2,927
Total number of cases assisted during year	9,728
Cases terminated	2,646
Cases being assisted at 31st December, 1966	7,082
Cases on waiting list at 31st December, 1966	410
Visits paid by Assistant Organisers	81,982
Number of domestic helps employed at end of year (part-time)	3,476

* Includes 668 cases which ceased and recommenced later in the year.

Types of Case Assisted during the year.	*Percentage of Total.*
Maternity (including expectant mothers)	1.4
Tuberculosis	0.2
Chronic sick (including aged and infirm)	96.7
Others	1.7

MENTAL HEALTH

ADMINISTRATION.

(*a*) The Mental Health Sub-Committee of the County Health Committee is responsible for the administration of the Mental Health Service.

(*b*) *Staff* :—

Mental Health Executive Officer	1
Mental Welfare Officers	21
Supervisors, Junior Training Centres	8
Assistant Supervisors, Junior Training Centres	13
Trainee Assistant Supervisors, Training Centres	19
Warden/Manager Residential Adult Training Centre	1
Matron Residential Adult Training Centre	1
Assistant Matron, Residential Adult Training Centre	1
Superintendents (Male) Adult Training Centres	5
Deputy Superintendents (Female) Adult Training Centres	4
Assistant Supervisors Adult Training Centres	2
Craft Instructors Adult Training Centres	14

The excellent co-operation with hospital consultants has been maintained and a number of cases have been referred to hospital out-patient clinics for assessment and advice regarding the future treatment and training. The department has continued to have the part-time services of Dr. M. R. Walley, Consultant Psychiatrist, who visits centres regularly and has advised on a number of difficult cases. School medical officers carried out the routine annual medical examinations of all those attending training centres. Arrangements were also made for the examination of trainees at adult centres at the mass radiography units.

During the year three mental welfare officers continued in their last year of a two-year course leading to the Certificate in Social Work at the College of Commerce, Newcastle upon Tyne. Two officers returned after having successfully completed a one-and two-year course respectively.

Four trainee assistant supervisors, one superintendent and one craft instructor were seconded to take courses leading to the Diploma for Teachers of the Mentally Handicapped. Of the three trainee assistant supervisors seconded on courses last year, two were successful in obtaining the Diploma for Teachers of the Mentally Handicapped and one was successful in Part I of the examination. A total of 23 training centre staff have obtained qualifications as a result of the Council's policy of seconding trainees on approved one- and two-year courses. Forty-seven members of staff at training centres attended a regional study day at Prudhoe and Monkton Hospital, Prudhoe-on-Tyne.

WORK UNDERTAKEN IN THE COMMUNITY.

1. *In relation to mentally subnormal persons*—

(*a*) Ascertainment—cases of mental subnormality are notified by school medical officers, child welfare medical officers, private practitioners, hospital staff, health visitors and social workers. As previously stated very full use was made of hospital out-patient facilities for the diagnosis of mental subnormality and advice on prognosis and disposal. The scheme brought into operation in 1960 for routine testing of all infants born in the County to detect cases of phenylketonuria has been continued.

(*b*) Under the provision of the Education Act, 1944, the local education authority made the following notifications to the local health authority under Section 57 :—

	M	*F*	*Total*
Children considered unsuitable for education within the school system	48	40	88
Children who require further supervision after leaving school ...	23	21	44

(*c*) On the 31st December, 1966, there were 3,710 mentally subnormal persons on the register giving an ascertainment figure of 3.78 per 1,000 population in the Administrative County area. During the year 166 were added to the County Council register compared with 115 during 1965.

(*d*) Supervision—the supervision of mentally subnormal persons has continued to be carried out mainly by health visitors who made 5,087 visits during the year. However, the practice of referring adult male subnormals to mental welfare officers has been continued and it is intended that this procedure will be extended.

(*e*) Guardianship—there are no guardianship cases in the County at present.

(*f*) Junior Training Centres for mentally subnormal persons—the number of pupils receiving training at junior centres on 31st December was as follows :—

Centre.	*Number of Pupils.*
Bishop Auckland	46
Chester-le-Street	17
Consett	38
Durham (including special care)	49
Hebburn	44
Newbottle	27
Easington	46
Stockton	56
Darlington	3
Gateshead	7
South Shields	2

In addition 15 children attended as day pupils at Prudhoe and Monkton Hospital.

Transport to the centres, mid morning milk and mid-day meals are provided at each centre while regular routine dental and medical examinations are carried out on all pupils.

The special care unit at Durham Junior Centre for children whose physical and mental handicaps render them unfit for training in the normal junior centre classes, which was brought into use at the end of 1964, has continued to fill a very real need and on the 31st December ten children were in attendance.

The new purpose built junior training centre at Chester-le-Street was opened on 9th May, 1966, and the extensions to Consett Junior Training Centre were completed during the year.

(*g*) Adult training centres for mentally subnormal persons—the number of trainees receiving training at adult centres on the 31st December was as follows :—

Centre.	*No. of Trainees.*
Bishop Auckland	66
Durham	63
Fencehouses	67
Lanchester (Day)	37
Lanchester (Residential)	25
Easington	12
Stockton	35

Twenty trainees also attended as day patients at Prudhoe and Monkton Hospital.

During the year inter-centre activities continued to take place, and a successful sports day at Fencehouses was held in July, when Durham Adult Training Centre won the championship shield. Inter-centre football matches were played during the Autumn, and youth clubs have been formed at Bishop Auckland and Consett Centres. It is intended to continue and extend these activities.

Work on the purpose built centres at Hebburn for adult sub-normals was completed in December, and the first trainees were admitted early in January, 1967. Work commenced on a centre for adults at Easington which it is anticipated will be brought into use during 1967.

Bishop Auckland Adult Training Centre—This centre, which came into use in May 1965 is now well established, and contracts have been obtained from four local firms for the assembly of large wooden crates, carding of buttons, the packaging of machine accessory kits, and film labelling and re-packing. One trainee was successfully placed in outside employment during the year. The recently formed youth club has proved to be a success, meetings were held twice a month and attendance was excellent.

Durham Adult Training Centre—during the year outside employment was found for three trainees. There has been a continuous supply of contract work from outside firms, and the car washing scheme continues to be successful. This Centre obtained the County Council contract for the manufacture of clothes airers for use in schools, nurseries and hostels. Lessons in simple cookery were given to the trainees, who were encouraged to visit local shops to purchase the various ingredients necessary for the projects. The Youth Club is now well established and attendance at the social evenings was satisfactory.

Fencehouses Adult Training Centre—during the year two trainees were placed in outside employment. Contracts with outside firms have been maintained and the supply of firewood to County Council establishments has been increased. The Superintendent of this Centre was seconded to a one-year course for Teachers of Mentally Handicapped Adults, and during his temporary absence the Superintendent of Durham Adult Training Centre carried out his duties. Trainees have continued to pay weekly visits to a local indoor swimming bath.

Lanchester Adult Training Centre—Three trainees were placed in outside employment during the year, one of whom obtained a post as a gardener in the County Hall grounds. Two of these were found lodgings in the neighbourhood but one returned to the Centre when his work terminated. The Centre has continued to obtain contracts with local firms for the manufacture of bread trays, wooden reels for barbed wire and the assembly of electrical components. The printing section was extended and work done during the year included the printing of visiting cards for outside staff employed by the County Council. A large green house was built by the trainees and there was an increase in the amount of garden produce. A workroom at the Centre has been adapted to facilitate training in the use of make-up, hairdressing and manicuring. On 31st December, 1966, there were eight full-time residents at the Centre, in addition to 17 who are accommodated on a five day week basis.

Easington Junior Training Centre. The centre continued to operate satisfactorily during the year and on 31st December, 1966, 46 children and 12 adults were in attendance.

Stockton Junior and Adult Training Centres. During the year the planned programme of expansion at both centres was continued. The junior centre caring for 58 children and the adult centre with 16 boys and 19 girls. In the adult centre the males continued with the contract work and a number of polling booths have been completed and delivered.

(*h*) *Hospital Admissions*—during the year 18 patients were admitted to hospital under Order and 34 were admitted informally under the provisions of Circular H.M.(58)5. During the whole of the year 99 patients were admitted to hospital for short term care in accordance with the terms of Circular 5/52 of the Ministry of Health. Details of all admissions are given in Table 19, Part III.

2. *In relation to Mentally Ill Persons.*

During the year mental welfare officers investigated cases under the Mental Health Act, 1959, at the request of consultant psychiatrists, general medical practitioners and police etc., and Table 19, Part III. gives details of admissions arranged by them (it should be noted, however, that these figures are not the total of all hospital admissions for the year).

The very close liaison with hospitals has been maintained and the practice of mental welfare officers attending psychiatric out-patient clinics and case conferences has been continued. On the 31st December, 1966, some 1,193 cases, mainly referred by psychiatric hospitals, were under the supervision of mental welfare officers.

The club for ex-patients and patients about to leave Winterton Hospital, organised by the Durham and District Association for Mental Health, continued to function, although towards the end of the year there was a decrease in the support given to this Association. Mental welfare officers in Durham area assisted in the running of the club.

SECTION C—PREVALENCE OF INFECTIOUS DISEASES

Tables 20, 21, 22, 23, and 24—Part III give particulars of cases of infectious disease occurring during the year, and the mortality from the principal infective diseases.

Scarlet Fever. There were 339 cases and no death. The corresponding figures for 1965 were 572 cases and no death.

Whooping Cough. The number of cases (655) increased by 230 when compared with the previous year. There was one death in 1966 compared with one in 1965.

Diphtheria. For the eighth year in succession there was no confirmed case.

Measles. The number of cases 8,009 showed a decrease of 2,523. Two deaths were registered. The case rate was 8 per 1,000 population.

Pneumonia. Notified cases decreased from 135 in 1965 to 115 in 1966. There were 729 deaths recorded.

Meningococcal Infection. During the year there were 15 cases and 3 deaths. In 1965 the figures were 8 cases and 3 deaths.

Acute Poliomyelitis. No case was recorded during the year compared with one (paralytic) in 1965.

Acute Encephalitis. Fourteen cases were notified compared with seven in the previous year.

Dysentery. A total of 298 cases occurred, a decrease of 34 cases compared with the previous year.

Enteric or Typhoid Fever. One case was recorded during the year compared with three in 1965. No death occurred in 1965 or 1966.

Paratyphoid Fever. In 1965 there were two cases compared with one this year. No death was recorded in either year.

Food Poisoning. During the year 36 confirmed cases were recorded compared with 68 in the previous year.

Influenza. The number of deaths registered was 66, equal to a death-rate of 0.07 per 1,000 population compared with 34 deaths and a death-rate of 0.03 in 1965.

Diarrhoea and Enteritis (under 2 years of age):—Deaths registered (16) and the death-rate (0.016 per 1,000 population) were more than last year when 13 deaths occurred giving a death-rate of 0.013. The rate per 1,000 live births was 0.94 compared with 0.74 in 1965.

Puerperal Pyrexia. During the year there were 61 confirmed cases of puerperal pyrexia, the same number as in 1965. No death was registered from puerperal sepsis.

According to information received 44 cases had hospital in-patient treatment.

Ophthalmia Neonatorum. There was one case of ophthalmia neonatorum notified during the year.

WELFARE SERVICES

I. Welfare of the Physically Handicapped.

(*a*) *Register.*

At the end of the year there were 1,314 males and 1,109 females on the register of physically handicapped. This shows an increase of 180 during the last year. These physically handicapped persons were referred by hospitals, general practitioners, other staff of the health and welfare department, while the remaining cases came from various other statutory and voluntary social agencies, patients' friends and in some cases from the patients themselves.

(*b*) *Welfare Work for the Physically Handicapped.*

The Senior Executive Social Worker continued to supervise the work of social workers and also that of the home teachers of the blind. During the year a senior social worker and six student social workers were appointed while the number of general social workers employed increased to fourteen. During the year social workers continued to be based at offices in seven different parts of the county.

The kind of help given to physically handicapped persons has varied widely. House alterations have been arranged and financed in co-operation with district councils, while a wide variety of aids for handicapped persons have been supplied. Other patients who have not needed material help have been given support by the social workers in facing their personal and family problems. There is also a scheme whereby Local Housing Authorities may obtain grants from the County Council towards the provision of houses specifically designed for physically handicapped persons.

(*c*) *Holiday Scheme for Physically Handicapped.*

With the agreement of the Education Committee, the Health Committee were able to sponsor a further holiday scheme for physically handicapped persons at Windlestone Hall, a special residential school, during the period 29th July to 26th August. Ninety-nine handicapped persons had the advantage of a holiday at Windlestone during this four week period. The majority of the handicapped persons were conveyed to Windlestone Hall by ambulance, the remainder finding their own way. The British Red Cross Society carried out the day to day administration, providing the staff for the project, and the venture was a great success. The British Red Cross are again to be congratulated on their magnificent effort.

A holiday course for twenty-five physically handicapped teenagers was arranged in connection with the Durham County Association of Youth Clubs at Seaham Grammar/Technical School during the period 30th July to 6th August. This was a residential course during which period tuition was given in art, photography, handicrafts and music. The Education and Health Committees shared the cost of this holiday and the Durham County Association of Youth Clubs are to be congratulated for making this holiday course a success.

(*d*) *Occupational and Diversional Therapy.*

One occupational therapist was appointed and two resigned during the year, leaving two employed by the Health Committee. They visit handicapped persons in their homes in order to train them and assist them in various crafts. Assistance is also given by craft instructors who attend meetings of clubs for physically handicapped.

(*e*) *Car Badges for Disabled.*

At the end of the year 241 car badges were in use by disabled drivers to enable them to obtain parking privileges. New applications for badges are made at the expiry of the disabled person's driving licence or at the time a new vehicle is obtained.

(*f*) *Voluntary Organisations.*

The County Council has worked in co-operation with the Durham County Association for the Physically Handicapped and during the year made a further grant to help them in their work. The number of social clubs for physically handicapped persons sponsored by the County Association has increased during the year by three, to make a total of 22. These clubs continue to be invaluable as meeting places for physically handicapped persons, where they can take part in social, as well as handicraft activities.

Twelve young people attend the day work centre at the Percy Hedley School for Spastics of whom ten are resident in the Chipchase Hostel.

The Training and Work Centre administered by the Sunderland and District Spastics' Society (a voluntary organisation) had, at the end of the year, ten of our adult spastics who were unable to obtain employment on account of their disability. Transport by taxi was provided for six spastics who would otherwise have been unable to attend the Centre, the cost of this transport being accepted by the County Council.

(*g*) *Residential Accommodation for Physically Handicapped.*

Residential accommodation is provided for 46 physically handicapped persons at homes outside the County, run by voluntary organisations.

II. Welfare of the Blind and Partially Sighted.

(*a*) *Register and Registration of Blind Persons.*

The number of blind persons on the County Council's register on the 31st December was 1,855, 23 more than at the end of 1965.

Blind population according to age and sex.

	1 & under	2-4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80 & over	Total
Male ...	—	2	9	9	11	28	39	77	124	70	71	198	185	823
Female ...	1	2	13	7	8	8	28	53	100	90	103	301	318	1,032
Total ...	1	4	22	16	19	36	67	130	224	160	174	499	503	1,855

During the year the names of 276 blind persons were added to the register including 25 blind persons transferred into the County from other areas. Following surgical treatment, sight was restored to five persons previously registered as blind, all of whom were certified neither blind nor partially sighted. During the period under review 248 blind persons died or left the county area.

The seven part-time ophthalmologists appointed by the County Council examined 421 cases referred to them while in addition 37 forms B.D. 8 were submitted by other ophthalmologists. These 458 cases are classified as follows :—

First Examination :—

No. certified blind	210
No. certified partially sighted	85
No. certified not blind	65

Re-examinations :—

No. certified blind (9 already certified)	41
No. certified partially sighted	42
No. certified not blind	15

No case of retrolental fibroplasia was reported during the year.

(*b*) *Register of Partially Sighted.*

The number of partially sighted cases on the register at the 31st December was 395, the sex and age classification being :—

	0-1	2-4	5-15	16-20	21-49	50-64	65 & over	Total.
Male	—	2	29	17	35	17	80	180
Female	—	—	20	11	24	25	135	215
Total	—	2	49	28	59	42	215	395

In all cases of cataract, glaucoma, or any other disability a letter is addressed to the patient's private doctor informing him of the findings and the recommendations of the ophthalmologist.

High Myopia. It has been the practice for many years for the school health service to notify the Health Department of all school leavers suffering from high myopia who are not registered blind or partially sighted persons. These cases are followed up by health visitors to ensure that the children continue to wear suitable spectacles and obtain replacements where necessary. Advice and assistance is given regarding suitable employment.

(*c*) *Employment.*

The following information relates to trained blind persons in employment at the end of the year :—

	Institution Workers.	*Home Workers.*
Royal Institution for the Blind, Sunderland	40	2
Cleveland & South Durham Institute for the Blind, Middlesbrough ...	17	2
Hartlepool Workshops for the Blind, West Hartlepool	5	—
National Library for the Blind, Braille Copyists	—	2
Catholic Blind Institute, Liverpool	1	—

On the 31st December the number of trained but unemployed blind persons was 12.

(*d*) *Home Teaching Service.*

There are 17 qualified home teachers for the blind, of whom three are registered blind persons.

These members of the staff visit blind and partially sighted persons, teaching braille and moon type when required and acting as general social workers for all blind and partially sighted persons on the register. Five of the home teachers hold classes for the teaching of handicrafts, while the remaining home teachers provide tuition in handicrafts in the homes when required.

(*e*) *Social Centres.*

Seven centres are established and operating in the County with the co-operation of the voluntary agencies. Home teachers visit the centres and provide help and guidance when necessary.

(*f*) *Placement Service.*

By arrangement with the Ministry of Labour, use has been made of their Placement Officer in finding and placing suitable persons in open industry.

(*g*) *Holidays.*

The Health Committee provided a week's holiday at Scarborough for 12 deaf blind persons, together with their attendants. The detailed arrangements for this holiday were made by the North Regional Association for the Blind.

(*h*) *Homes for the Blind.*

At the end of the year there were 41 blind persons in homes for the blind, 36 of these being residents in Palatine House, Durham, the County Council hostel for the blind. The remaining five lived in homes outside the County.

III. Welfare of the Deaf.

The County Council scheme under Section 29 of the National Assistance Act approved by the Minister on the 27th September, 1952, operates throughout the county. Most of the work is carried out on an agency agreement by the Northumberland and Durham Mission to the Deaf and Dumb for the northern part of the county and the South Durham and North Yorkshire Association for the Deaf for the southern part of the county. Welfare officers visit and look after general welfare of registered persons. Five hard of hearing clubs operate throughout the county to which the County Council make a grant for administration, maintenance charges and equipment. At the end of the year the number of persons registered as deaf or hard of hearing was 895 classified as follows :—

	M.	*F.*	*Total.*
Under 16 years	41	62	103
16-64 years	341	273	614
65 years and over	90	88	178
Total	472	423	895

At the end of December 64 school children (33 boys and 31 girls) were attending residential schools for the deaf, outside the county area.

IV. Welfare of the Elderly.

One of the results of improved medical and social services is that more people live longer and the deterioration associated with old age tends to be delayed. This deterioration in physical and/or mental faculties when it does occur frequently necessitates the deployment of a variety, or occasionally the whole range, of the authority's staff, employed to deal with the blind or partially sighted ; the deaf ; the physically handicapped ; the mentally disturbed ; the sick and the bed-ridden.

Over the years the elderly have been using an increasing proportion of the health and welfare services and this trend will obviously continue. During 1966, 62% of district nurses time, 9% of health visitors time and 85% of home helps were employed assisting old people in this county. At the end of December, 1965, in the administrative county there were approximately 102,650 persons over the age of 65 years and this number is expected to rise to 119,400 in 1971 and 131,800 in 1976.

The basic need of the elderly is for a home of their own where they can enjoy privacy and comfort with the social contacts which they desire.

Houses of suitable size and design are, therefore, particularly important, supplemented, where necessary, by welfare services including communal facilities, emergency bell systems, warden services, " meals on wheels " or " meals by neighbours " services, chiropody services, and adequate home nursing, home help and health visitor advisory services. Despite these services the time may still come when this support is insufficient and it is then that accommodation in a residential County Council hostel is needed. Here again the object must be to keep the elderly as happy as possible and out of hospital as long as possible.

During the year, to encourage the provision of communal facilities, warden services etc., in association with houses for old people the County Council continued to make grants to district councils of a maximum of £30 per house per annum when such facilities are provided. It was agreed during the year that this grant should be increased to £60 from the 1st April, 1967.

An expansion of home help and after-care service was necessary and greater financial assistance was given to schemes providing chiropody, meals on wheels, meals by neighbours and luncheon club services.

Continued support, financial and otherwise, was given to the Durham County and Tees-side Old People's Welfare Committee, a voluntary organisation which has been most successful in the sponsoring of clubs for old people and various social functions such as choir festivals.

The policy to provide more hostel accommodation with additional comprehensive facilities has been pursued.

V. Family Case Work Service—Problem and Homeless Families Etc.

Although, numerically, problem families are an insignificant fraction of the population, they nevertheless impose a strain on case-workers which is completely out of proporation to their numbers. This strain is intensified when homelessness or the threat of homelessness is one of the problems to be dealt with. Unfortunately, the house owners' interests and welfare interests do not always coincide and social workers find themselves tackling a difficult and at times unpleasant problem under rather strained circumstances. Furthermore, even after evicted families have been through the process of rehabilitation and an offer of rent guarantee made by the County Council, there is frequently great reluctance to their acceptance as household tenants.

During the year, ten new members of the fieldwork staff were recruited—four social workers, all graduates who are intent on taking professional training courses and six trainee social workers who undertook a six-weeks full-time in-service training programme on joining the staff. They have since been attached to experienced social workers. The experiment of recruiting trainee social workers could certainly be regarded as successful in so far as the previous intake were all catered for in terms of training courses, three being accepted for Certificate in Social Work Courses, one accepted for training as a home teacher for the blind and one proceeding with a London University External Diploma in Social Science. The return on this investment in training lies in the future—in the quality of service provided.

Duties in Relation to Section I of the Children and Young Persons Act 1963.

The duty of co-ordinating social work carried out by statutory and voluntary agencies with problem families has continued and remained no less challenging than when the duty was undertaken on the 1st April, 1964. To provide an effective service close liaison has been maintained with the various agencies involved by continuing with the arrangement of holding Area Family Case Conferences throughout the Administrative County area, including the excepted districts of Easington Rural District and Stockton Municipal Borough. The conferences have been held under the Chairmanship of the Assistant County Medical Officers. In the excepted districts the District Medical Officers of Health have assumed Chairmanship. It is worth repeating that in establishing the conferences that it was envisaged that they would serve a dual function of bringing to the notice of the various agencies, problem families or families experiencing difficulties and in danger of breaking-up. Secondly the conferences could afford field workers the opportunity of becoming acquainted and, therefore, improving liaison at field level thus consolidating relationships and understanding of the difficulties involved in this demanding work. In the light of experience it would appear that the objectives have been achieved and that preventive and rehabilitative work with problem families is now firmly established.

Statistical returns for the year ended 31st December, 1966, show that 5,581 families were notified to officers of the Health Department as being in need of advice or assistance, a decrease of 16.5% over the year ended 31st December, 1965. Such a decrease is perhaps not unnatural following an initial period where there would seem to have been almost saturation notification. The system of early warning of notification of families likely to break-down continues as in the past to work excellently due to the full co-operation mainly of Housing Managers and Health Visitors, as well as the officers attending the Family Case Conferences.

Under Section I of the Act, local authorities are authorised to provide financial and material assistance to families in an effort to prevent the break-up of the family and to reduce the need to receive children into care and authority was given to expend up to £25 in emergency on any particular family in need, additional expenditure being subject to the prior approval of the Chairman of the Health Committee. In this way, assistance was given on 49 occasions during the year and it was again found that bedding was the most common need. Assistance was also given to 30 families in the form of furniture which had been given by private persons, or which had been written off as of no further use by the County Council. In addition, officers obtained financial assistance from other sources in 94 cases and material assistance in 604 cases. This continues to illustrate the good will of other agencies and in particular the W.R.V.S. have proved most helpful in supplying household effects and clothing.

The total case load of families under supervision by officers of the Health Department on the 31st December, was 1,242. Not all of these families were necessarily on the verge of break-up, but all were considered to be in danger of developing more serious problems if there was no form of supervision.

During the year there was a further new development in offering material aid in so far that three families were discharged from Lambton Grove (rehabilitation), Birtley, and as they did not have sufficient furniture and domestic utensils to re-establish themselves in their own homes, a total of £125 was expended to ensure that they could recommence family life in their own home and be able to function effectively.

VI. Temporary Accommodation (National Assistance Act, 1948—Section 21 (1)(*b*).

(*a*) *Present Position.*

The use of the Cottage Homes at Houghton-le-Spring for families requiring temporary accommodation continued and during the year eight families were admitted, the length of stay varying from three to 23 weeks.

Thirty-four families were provided with emergency accommodation at Lambton House, Birtley, the length of stay varying from two to 28 days. From this unit five families were transferred to temporary accommodation at Houghton-le-Spring. 24 were found alternative accomodation and two were transferred to the Rehabilitation Unit at Lambton Grove.

At Lambton Grove Rehabilitation Unit the further adaptations were completed and during the year five families were admitted. At the end of the year the number of persons in the three units was as follows:—

Name of Unit.	Adults	Children	Total
Cottage Homes, Houghton-le-Spring	7	18	25
Lambton House, Birtley	3	5	8
Lambton Grove, Birtley	6	15	21
Total	16	38	54

This compares with 10 adults and 23 children at the end of 1965.

(*b*) *Future Developments.*

Efforts to secure alternative premises for this service continued having regard to the impending closure of the Cottage Homes at Houghton-le-Spring and the deterioration of the temporary structure at Lambton Grove.

VII. Hostel Accommodation for those Needing Care and Attention (National Assistance Act 1948, Section 21).

(*a*) *Present Position.*

At the end of the year there were 28 residential homes providing 1,209 places. Of these, eight were converted premises and 17 were built specifically as hostels (one, Palatine House, Durham, being for blind and partially-sighted persons).

At the end of the year the furnishing of the Hebburn Hostel was in progress and hostels were under construction at Brandon, Fishburn, Hartlepool, Houghton-le-Spring and Lanchester. Arrangements were in hand for work to commence on further hostels at Burnopfield, Durham, Leadgate, Spennymoor, Fence Houses, Hetton-le-Hole and Washington during 1967. The approved building programme provides for a further 30 hostels to be built between 1968 and 1977.

157 residents were provided with short stay accommodation in the Holiday Home at Seaton Carew. These included 36 residents of other hostels in the County and two residents accepted direct from hospital. There were 13 persons resident in this unit on the 31st December, 1966.

The number of beds in Cambridge House, Barnard Castle, was further reduced to 67 and at Heath House, Houghton-le-Spring to 98.

The 1,209 places provided directly, together with 106 beds occupied in transferred hospital accommodation, represents an increase of 13 in the number of places available compared with 1,302 at the end of 1965. The small increase in the total number of places, despite the fact that the new building at Birtley was commissioned, is accounted for by the fact that there were reductions in the number of beds in use in transferred hospital accommodation and in two former Public Assistance Institutions. The places available were distributed as follows:—

In Homes controlled by the Welfare Sub-Committee:—

	Residential Accommodation beds provided.
Former Public Assistance Institutions	
Cambridge House, Barnard Castle	67
Heath House, Houghton-le-Spring	98
Ivy House, Sedgefield	76
Adapted Premises.	
Seaton Holme, Easington	35
Weardale House, Stanhope ...	59
Newtown House, Stanhope ...	30
The Hermitage, Whickham ...	18
Grove Park, Barnard Castle ...	22
Owton Fens, Greatham	21
Holmfield, Crook	30
Glencliffe, Seaton Carew	37
Purpose Built Hostels.	
Parkside, Billingham	38
Winton House, Winlaton	38
Essyn House, Easington	40
Dene House, Bishop Auckland ...	38
Shafto House, Newton Aycliffe ...	45

	Residential Accommodation beds provided.
Purpose Built Hostels (contd.)	
St. Bede's House, Jarrow	38
Stanfield House, Stanley	38
Glenroyd House, Consett ...	38
Mendip House, Chester-le-Street ...	38
Boldon House, East Boldon ...	45
Redhill House, Stockton	45
Kepier House, Durham	45
Millbank House, Seaham	38
Derwentdale House, Ryton... ...	45
Wellburn House, Stockton	45
Purpose Built Hostel including frail/ambulant wing.	
Shadon House, Birtley	45
Home for the Blind and Partially Sighted.	
Palatine House, Durham	38
Holiday and Short Stay Home.	
Glencliffe Holiday Home, Seaton Carew	19

In Homes transferred to the Regional Hospital Board on 5th July, 1948.	Chester-le-Street	30
	Durham	20
	Lanchester	56
		106

In Homes controlled by:—

(*a*) Neighbouring County Borough Councils.	Darlington	4
	Gateshead	9
	South Shields	1
	Sunderland	2
(*b*) Other Local Authorities		11
In Special Homes		24
	Total	51

The number of employees in the 28 premises directly controlled by the Health Committee was as follows:—

Superintendents	3
Matrons	24
Wardens	2
Other staff	418

The number of cases on the waiting list on the 31st December was 530 compared with 455 in 1965.

Maintenance Charges.

No change was made in the minimum and standard charges during the year, having regard to the Prices and Incomes Policy of H.M. Government. As a result of the Social Security Act, 1966, charges payable by 160 residents were reduced and it is estimated that the reduction in income from this source will be £8,000 per annum.

X-ray examinations.

There is a relatively higher incidence of tuberculosis in the older age groups, and in order to detect any case which might benefit by treatment, and also to protect residents from possible infectious cases efforts are constantly made to ensure that all aged persons admitted to residential homes have their chests x-rayed before admission.

(*b*) *Future requirements.*

The amount of residential accommodation required for the elderly and others "in need of care and attention" is affected by the housing conditions ; the existence of warden services ; the degree of support forthcoming from families and neighbours and by the amount of residential accommodation provided privately and by voluntary organisations otherwise than as agents of the local authorities.

To provide the number of beds in hostel accommodation to meet the anticipated requirement by 1976, 2,014 additional places will be necessary.

SECTION E—INSPECTION AND SUPERVISION OF FOOD AND DRUGS

1. MILK (SPECIAL DESIGNATION) REGULATIONS, 1963.

At the end of the year there were five plants processing milk in the administrative county, all of which were authorised to use the special designation " Pasteurised " while one dairy holds an additional licence for the sterilising of milk. All plants are of modern design. Pasteurising units operate on the H.T.S.T. System and the sterilising plant includes Danks Tanks. The total quantity of milk treated is approximately 58,000 gallons per day. Regular inspections of these dairies are made and satisfactory standards maintained.

During the year, one dairy completed the installation of a new washing, filling and capping line, together with automatic decrating, recrating and stacking. This line operates at a rate of up to 280 bottles per minute, and while satisfactory, such a rate is indicative of the practical difficulty of 'spotting' unsatisfactory bottles which have been returned to the dairy in such a condition as to be incapable of being satisfactorily cleansed by the washer.

Misuse of bottles continues, and the number of complaints of unsatisfactory bottles being delivered to consumers is generally the same as in previous years. Daily the dairies licensed by this Council wash and fill some 590,000 bottles. With modern washing and filling equipment, these numbers present no difficulty, provided that empty bottles have been rinsed immediately after use, returned promptly and not used for any purpose other than as milk containers. The co-operation of housewives, school teachers, canteen supervisors, and others similarly engaged in ensuring that this is done, would be most helpful to the dairy staff and be beneficial to the consumer.

Although the County is a specified area in which only milk of a special designation can be sold, exception is made as a last resort. Where no such supplies are available the Ministry of Agriculture and Fisheries issue a " Consent " licence enabling a retailer to dispense with the requirements of the order. During the year eight such consents were in operation. The amount of milk covered by these consents is very small and only serves the needs of people living in isolated houses.

Routine samples continued to be taken by County Health Department staff of milk delivered to schools and children's homes. Fifteen complaints have been received concerning the condition of churns or bottles of milk delivered to schools, in one case it was necessary to take legal action and the Dairy concerned was fined £100 and costs. As requested by the Ministry of Health, milk produced at hospital farms has been sampled in accordance with their scheduled requirements.

At the request of the Durham Hospital Management Committee, routine samples are taken of milk delivered to hospitals in their group.

Under the above regulations the County Council as the Food and Drugs Authority has the duty of licensing and supervising all dealers in milk, the number licensed being as follows :—

No. of current licences at 1.1.66	(i) 'B' Licences	4
	(ii) 'E' Licences	1,645
No. issued during the year	(i) 'B' Licences	3
	(ii) 'E' Licences	186
No. cancelled during the year	(i) 'B' Licences	Nil
	(ii) 'E' Licences	24

No. of current licences at end of year 1,814.

Details of the results of all examinations of samples of milk are given in Table 25, Part III.

To ensure that the arrangements for handling and storing milk are maintained at a satisfactory level, some 410 inspections of premises have been made. These have resulted in the provision of 53 new and improved premises, and a further 10 cold storage units have been installed. A total of 55 cold storage units are now in operation. These units can be grouped in a purpose built store providing separate accommodation for up to nine dealers, can be sited so that inconvenience due to noise is minimal and enables deliveries by the dairies to be carried out during normal working hours, so eliminating deliveries during the night.

In October, the dairy industry made known its intention to cease retailing milk in half pint bottles in the county for economical reasons. Many people were concerned that this would create hardship to certain consumers, particularly pensioners. Nevertheless, the change occurred and half-pint bottles are no longer available.

The policy of relating routine sampling to the quantity of milk sold by the various dealers has continued, to avoid as far as possible duplication, but at the same time to spread the work over the areas of the various County districts. Each local authority is furnished with a monthly report of all samples taken within its area.

The fourteen samples that failed the phosphatase test were isolated cases, and investigations gave no indication of the cause of the failures. Where a sample failed the methylene blue test, an investigation was made, appropriate advice given and a repeat sample taken. If a repeat sample of untreated milk from a producer/retailer failed the test the Divisional Milk Officer of the Ministry of Agriculture, Fisheries and Food was informed.

Sampling of untreated milk for antibiotics has continued in keeping with previous procedure of concentrating on untreated milk on retail sale. 591 samples of untreated milk have been submitted to the Public Health Laboratories for antibiotic examination, six of which contained antibiotics in excess of the accepted figure. Appropriate action was taken in each case.

2. Food and Drugs Act, 1955. Section 31.

Samples of untreated milk are being obtained and submitted to the Public Health Laboratories for biological examination. The results of 470 samples have been received and are shown in Table 25. The 13 positive results refer to samples of untreated milk which on examination showed brucella abortus to be present. They represent 12 cases and were obtained from 12 producer/retailers. In 10 cases the positive results were obtained from guinea pig inoculation, generally from samples taken some eight weeks previously, and because of the herd history and in particular the movement of the animals into or out of the herd concerned during this time, it was agreed with officials of the Health Department of the local authorities concerned and the producer, that herd testing be carried out immediately in co-operation with the producer's veterinary officer. This resulted in positive and suspicious animals being withdrawn from the herd as speedily as possible, when routine testing continued. In one case the positive result was from a culture, which on investigation showed routine testing by the producers veterinary officer to have taken place during the period between the taking of the sample and receiving the result, which had resulted in three cows having been slaughtered. In the remaining case, the positive result was from a guinea pig inoculation of a sample taken within the County from a producer/retailer in a neighbouring County. The appropriate officials were notified of this result and appropriate action taken.

Two known cases of undulant fever occurred during the year, the infection being traced to two producer/retailers within the County. In co-operation with the health officials of the local authorities concerned, appropriate action was taken.

Continued interest is being shown by producer/retailers throughout the County in brucella abortus and its effects, and an increasing number of the larger producers have regular routine testing of the herd carried out by their veterinary officer. Positive and suspicious animals are isolated and their milk sent for pasteurising, or the animals may be sent for slaughter or sold in the open market. There has been some slight development towards a brucellosis eradication scheme by the Ministry of Agriculture, Fisheries and Food in that in a reply to a question in the House of Commons in November, the Minister stated that the first stage—the establishment of a voluntary register of brucella free herds would start as soon as the necessary arrangements have been made, including the provision of extra laboratory equipment, printing of forms etc. This statement has stimulated the interest of producer/retailers and their desire to have routine testing carried out by their own veterinary officers, as a stated number of clear tests will make the herd eligible for immediate supervision by Ministry Inspectors. Even so, as the only safe supply immediately available is heat treated milk, my remarks in my last report are still pertinent. It may be difficult or impractical, to supply heat treated milk to all areas of the County, but where this is so, untreated milk could be made available on "Consent" licences, similar to those at present issued by the Minister in respect of non-designated milk. This would mean that the present practice of large quantities of untreated milk being sold in many areas, alongside processed milk, would cease and sampling by Health Authorities could then be concentrated on the greatly reduced number of suppliers of untreated milk in sparsely populated areas.

The Chief Inspector of Weights and Measures reported that 10 samples of milk from 10 suppliers were found to be either deficient in milk fat or showed evidence of added water. It was decided that four cases were suitable to take before the Justices, two cases were referred to the National Agricultural Advisory Service, three cases were investigated after which no further action was taken and one offender received a warning letter.

Food and Drugs Act

The following statement shows the results of examinations carried out by the County Analyst during the year :—

	No. of samples.	*No. adulterated.*	*% adulterated.*
Milk	1,297	18	1.4
Other foods and drugs	2,386	84	3.5
	3,683	102	2.8

Appeal to cow samples	21
Milk below presumptive standard but genuine	102

SECTION F—ENVIRONMENTAL HYGIENE

I. (*a*) *Bacteriological Laboratory Facilities.*

The Medical Research Council, acting on behalf of the Ministry of Health, continues to be responsible for the administration of the public health laboratory service.

The laboratories situated at the General Hospital, Newcastle upon Tyne, Havelock Hospital, Sunderland, General Hospital, Middlesbrough and the Friarage Hospital, Northallerton, undertake examinations for the administrative county area.

(*b*) *Water Supplies.*

Piped water is supplied to the various parts of the administrative county area by the following water undertakers :—

Tees Valley & Cleveland Water Company.

Durham County Water Board.

Sunderland and South Shields Water Company.

Newcastle and Gateshead Water Company.

Hartlepools Water Company.

Only small rural areas rely on local wells or springs.

Normal extensions of mains to housing estates and industry continue in all areas while work also proceeds in improving service reservoirs, treatment plants, etc.

The increased demand for water both for domestic and industrial use in the area continues. Filling of the Derwent Valley Reservoir was completed during the year, together with the treatment plant at Mosswood. Some 20 million gallons per day are being used from this source, enabling less economical and acceptable supplies, due to colour or hardness, to be with-drawn from service, although remaining available as reserve supplies. The demand for increased supplies in the industrial area of Teesside continues as before. The possibility of a further reservoir at Cow Green has been actively pursued, and in spite of determined opposition by the Botanical Society of the British Isles and other bodies concerned with the preservation of the countryside, the Bill promoted by the Tees Valley Water Board, for the construction of the reservoir, was approved. The proposal by the Tees Valley Water Board to construct a new weir and pumping station at Croft to allow further extraction from the river Tees has received further consideration. There is a great deal of opposition from local people and interested parties to the weir, and although planning permission has been granted by this authority the North Riding County Council had refused the application, consequently only one half of the weir is approved. The decision of the Ministry of Housing and Local Government is still awaited.

Copies of results of analysis of water samples taken by local authorities are sent to the county health department and, where necessary, further investigations are carried out. Of 712 samples taken, 106 were classed as unsatisfactory. These unsatisfactory samples were generally from individual spring or well supplies to isolated farms or dwellings and in a number of instances were repeat samples of those reported in previous years. Routine samples of supplies to schools, kitchens, dairies and similar establishments continue to be taken by officers of the department and have proved generally satisfactory. Where adverse reports were received they came from local supplies subject to variation in quality and quantity due to extreme weather changes.

Schemes providing improved or new water supplies to certain areas have been submitted for consideration. Investigations have been carried out in each case and appropriate recommendations made.

Fluoridation of Water Supplies.

The County Council have agreed in principle to the making of arrangements with local water undertakers for the addition of fluoride to water supplies which are deficient naturally in this respect as a means of reducing the incidence of dental decay especially in young children. Those living in the Hartlepool area have, of course, been drinking water containing a fairly high natural concentration of fluoride for a great number of years.

As a result of neighbouring local health authorities agreeing to the provision of fluoride in the water supply, it will be possible in the next few years for eighty-five per cent of the water supplied to the Administrative County to contain the optimum quantity of fluoride.

II. (*a*) *Rural Water Supplies and Sewerage Acts*, 1944-61.

During the year the County Council continued to make grants towards the cost of approved schemes for the provision of piped water supplies and main drainage in the rural areas of the County.

In connection with Section 2(1) of the above Acts, a number of schemes were under consideration, the following receiving contributions during the year :—

		Estimated Cost. £
(*a*)	Barnard Castle R.D.—Hudegate Sewer Extension	2,074
(*b*)	Darlington R.D.—Sadberge Sewerage and Sewage disposal scheme	36,600
(*c*)	Stockton R.D.—Carlton, Redmarshall and Letch Lane schemes	50,655
(*d*)	Barnard Castle R.D.—Proposed Toft Hill Sewer	5,950
(*e*)	Barnard Castle R.D.—Quarry Lane, Butterknowle Sewerage and Sewage Disposal Scheme	2,285

(*b*) *Drainage, Sewerage and Sewage Disposal.*

Routine inspections of existing disposal works and those under construction continue to be made. A number of schemes to replace overloaded and defective works and to enable the continued development of housing and industrial estates have been submitted by local authorities for consideration. Investigations have been carried out in each case and appropriate recommendations made.

Tyneside Sewage Disposal—The Tyneside Joint Sewerage Order, 1966, was approved by the Ministry of Housing and Local Government, the appointed day being 1st October, 1966. The first meeting of the Joint Sewerage Board was held on 5th October and a further positive step towards improving the condition of the river Tyne has been taken.

Teesside Sewage Disposal—The consultants engaged by the Joint Consultative Committee are continuing their investigation into the degree and type of pollution in the area and their report is awaited.

County Council Properties—As requested by the County Architect routine inspections of sewage disposal works, sampling of effluents and submission of appropriate recommendations of properties not on main drainage have continued.

III. Housing.

A statement as to the position of housing in the administrative County, compiled from information supplied by district councils, is given in Table 26—Part III.

IV. Closet Accommodation.

Table 27—Part III gives the number and type of convenience in each sanitary district at the end of 1966 together with information as to the conversions of ashpit privies and ash-closets into water-closets during the year.

V. School Swimming Pools.

As a consequence of difficulty being experienced in maintaining satisfactory conditions in two of these pools, at the request of the Director of Education responsibility has been accepted for the inspection and routine sampling of all swimming pools provided by the County Council. At present there are ten pools with a further three under construction.

SECTION G. GENERAL

1. Nursing Homes.

During the year no application was made to the County Council under Section 194 of the Public Health Act, 1936, for the delegation of their powers to district councils. The following maternity and nursing homes registered by the County Council were periodically inspected :—

Name and Address.	*Description.*
Percy House, Neville's Cross, Durham	Aged, infirm and border-line mental cases.
St. Cuthbert's Hospital, Rockliffe Park, Hurworth-on-Tees, (annexe to Hospital of St. John of God, Scorton).	Chronic sick (males).
" Milford," North End, Durham	Aged and infirm.
" Wayside", West Boldon	Aged teachers and their dependants.

" Ashbrooke ", Durham closed in April, 1966 and registration of " Rosemount," Barnard Castle, was cancelled on the 12th July, 1966, because of failure to comply with fire prevention regulations.

II. Nurseries and Child Minders' Regulations Act, 1948.

During the year nine premises were registered as nurseries and 10 persons were registered as daily minders. Details of registered nurseries and daily minders are available at the County Health Department.

When a request is received for registration of a nursery, a list of requirements is forwarded and the building is inspected by a senior medical officer. Only when all conditions are satisfied is the registration recommended to the Health Committee.

Attempts are made where necessary for a nursery to be visited monthly to ensure that adequate standards are maintained.

III. Tees-side (Middleton) Airport.

The County Council assumed responsibility for the health control at the Tees-side (Middleton) Airport early in 1965. Arrangements continued for medical cover at the Airport in co-operation with three local general practitioners. These doctors have agreed to act as medical inspectors under the Commonwealth Immigrants Act, 1962, and the Aliens Order, 1953, and they have been officially appointed by the Home Office. In addition, three senior members of my staff and myself have been appointed as medical inspectors.

With regard to the Public Health Airport Regulations, arrangements are made for one senior member of my medical staff to be available either in the office or at home on each occasion that aircraft from overseas are expected to land.

During 1966, 26 Commonwealth citizens subject to control under the Commonwealth Immigrants Act, 1962 arrived at the Airport in addition to 119 aircraft carrying 1,301 aliens.

PART II

SCHOOL HEALTH SERVICE

COMMITTEE

The administration of the School Health Service devolves upon the Welfare Sub-Committee of the Education Committee. Meetings are held in each month except August.

GENERAL STATISTICS

The numbers given throughout the report relate to the Administrative County Area excluding the excepted district of Easington and the Borough of Stockton. Statistics relating to Easington and Stockton-on-Tees appear in the reports of Dr. Rodgers and Dr. Peters respectively, on pages 115 and 127.

SCHOOLS AND SCHOOL CHILDREN

Type of School.		*No.*	*No. on Rolls, January, 1967.*
Nursery		18	816 (full-time) 138 (part-time)
Primary		441	86,000
Secondary Modern		98	35,216
Secondary Grammar/Grammar-Technical		22	15,144
Special Schools :			
Residential Schools for Educationally Sub-normal ...	3		
Day Schools for Educationally Sub-normal	5		
Residential Schools for Delicate pupils	1		
Residential Schools for Maladjusted boys	1		
	—	10	797
		589	138,111

(There is also a Residential Hostel for 15 maladjusted boys).

SPECIAL SCHOOLS

The number of pupils attending the County Special Schools in January, 1967, was as follows :—

(*a*) *For Educationally Sub-Normal Children* :—

Billingham Day School	113
Durham Day School	95
Felling Day School	109
Hare Law Day School	101
Spennymoor Whitworth House Day School	88
Dinsdale Park Residential School	70
Elemore Hall Residential School	71
Walworth Castle Residential School	30

(*b*) *For Delicate Children* :—

Windlestone Hall Residential School	84

(*c*) *For Maladjusted Children* :—

Redworth Hall Residential School	36
Total ...	797

INFECTIOUS DISEASES

The following figures show the number of cases notified to this department.

Scarlet Fever.	*Dysentery.*	*Measles.*	*Infective Hepatitis.*	*Poliomyelitis.*
171(84)	48(21)	1,535(2,001)	54(60)	None (None)

(Figures given in brackets refer to 1965).

It is gratifying to note that no case of poliomyelitis has been reported during the past five years.

SCHOOL HYGIENE AND SANITATION

Alterations continue to take place in the older type of schools to bring them into line with the Standards for School Premises Regulations and a number of schools had hot water installed during the year, bringing the total number of schools in the county with hot water installations to 545. The present position is that, with the exception of one school where there are technical difficulties, all county schools either have a hot water supply or are in the process of having one installed.

Satisfactory accommodation is provided in most new schools for the inspection of pupils by doctors' dentists and nurses, but this is lacking in many of the older schools, and in these schools Head Teachers' rooms or staff rooms are used. In some cases it is necessary to hire other premises for this purpose. Consideration is being given to the possibility of using a mobile medical inspection caravan where necessary.

The provision of individual towels in separate containers is continuing although this system is being reviewed. Wherever an out-break of dysentery or other similar disease is suspected recourse is made to paper towels which can be burned.

1. New schools and other establishments with hot water installation opened during 1966 :—

County Primary Schools	12
County Secondary Schools	4

2. Number of existing schools which have had a hot water supply installed during 1966 :—

Completed	11
In hand but not completed by 31st December, 1966	14

3. Number of schools with completed hot water installations on the 31st December, 1966 545

MEDICAL INSPECTIONS

Routine medical inspection is still being carried out in three groups :—

School Entrants.
Ten Plus Age Group.
School Leavers.

It will be noted from the figures given below that the total of routine medical inspections for 1966 is 144 less than for 1965 although the number of special inspections has risen by 764.

Year.	*Routine Medical Inspection.*	*Special Inspection.*
1963	33,542	12,561
1964	25,757	9,385
1965	32,318	8,039
1966	32,174	8,803

Full details of medical inspections and treatments are given in Table 28 Part III.

Physical Condition

The figures given below are derived from the individual assessments of all the school medical officers and as there are no fixed standards some deviation of opinion is inevitable. Nevertheless I feel that reliable conclusions can be drawn from this information, and it is pleasing to record that the percentage found " unsatisfactory " remains below 1%.

CLASSIFICATION OF PUPILS INSPECTED AT PERIODIC MEDICAL INSPECTIONS, 1963-66.

Year.	Number of Children Inspected.	Satisfactory. Number.	Satisfactory. Percentage.	Unsatisfactory. Number.	Unsatisfactory. Percentage.
1963	33,542	32,787	98.4	755	1.6
1964	25,757	25,181	97.8	576	2.2
1965	32,318	32,043	99.15	275	.85
1966	32,174	31,898	99.14	276	.86

Medical Inspection at Training Centres for the Mentally Subnormal.

School medical officers paid a total of 18 visits to carry out medical inspections of mentally sub-normal persons attending the training centres at Bishop Auckland, Chester-le-Street, Consett, Durham, Hebburn, Newbottle and Lanchester.

These children and youths have been found to be "unsuitable for education at schools" and were certified to be so by school medical officers who knew them and examined them as school children or potential school entrants. The existing arrangement by which medical officers continue to medically examine these children and youths, and also visit the training centres, provides a very desirable continuity of medial and social contact, and at the same time allows the doctor to be aware of the facilities available at the centre.

MEDICAL AND CONVALESCENT TREATMENT

A full list of school clinics, speech clinics and child guidance clinics showing details of services available and the day of attendance of staff is given in Table 29 and an analysis of cases examined and treated in school clinics is given in Table 30.

Ultra Violet Ray Treatment.

Ultra Violet Ray sessions are held at a number of clinics once or twice weekly, the nurse giving treatment at the direction of the school medical officer. Although the value of this form of therapy is not regarded as highly as in the past, some school medical officers believe there are cases where the children do benefit. At the request of consultant skin specialists some children suffering from certain skin conditions also receive treatment.

One and hundred and eighty five (185) pupils, referred by school medical officers, hospitals and medical practitioners, attended for sun-ray treatment, a total of 1,801 attendances being made.

Skin Diseases.

A total of 764 children received treatment during 1966 compared with 850 cases in 1965.

Defective Vision.

A total of 12,173 children were examined in the County for refractive errors compared with 11,945 in 1965. 2,981 of these were examined by the school oculists.

Spectacles were prescribed for 10,152 children and were supplied by opticians through the Supplementary Ophthalmic Service.

Diseases and Defects of Ear, Nose and Throat.

The number of school children who required treatment was 1,301 and of that number, 986 received operative treatment. In the previous year 1,391 required treatment, 977 receiving operative treatment.

Hearing Aids.

Progress reports are received from head teachers on children in ordinary schools who have hearing aids. These children are also seen periodically by school medical officers. This ensures that any lack of educational progress and any apparent worsening of the condition can be investigated.

Eighteen pupils were issued with hearing aids during the year through the National Health Service, making a total of 132 children with hearing aids at the end of 1966.

Orthopaedic and Postural Defects.

One hundred and eighty eight children received treatment in hospitals or at their out-patient clinics. Information received about these children is forwarded to the School Health Service and is passed to the general medical practitioners.

Convalescent Treatment.

No arrangements were made during 1966 for children to have periods of convalescence at convalescent homes.

SPECIAL INVESTIGATIONS AND VACCINATION AND IMMUNISATION OF SCHOOL CHILDREN AT SCHOOL

(*a*) *Tuberculin Testing of School Entrants.*

To make the school medical examination of children entering school even more complete and comprehensive the scheme commenced in September, 1963, to tuberculin test school entrants to indicate if they had been in contact with a case of tuberculosis, was continued during 1966. The tuberculin skin testing is carried out by the health visiting staff one week prior to the scheduled medical examination and the result of the test is read by the school medical officer at the medical examination. Those children found to be skin test positive are referred to the Chest Physician for examination.

The table in Table 31 shows details of the scheme for 1966. Of the 127 children found to be tuberculin positive (1.6% of the 8,009 children tested) the majority of those found to have been infected had resisted and overcome the infection quite satisfactorily. Three of the children were notified as new cases of tuberculosis.

(*b*) *Vaccination against Poliomyelitis.*

Arrangements made in previous years were continued, when school children, with the consent of their parents, were given immunising doses of oral vaccine by health visitors under the supervision of medical staff. The number of primary courses given was 2,437 and of reinforcing doses 6,271. It is encouraging to note that there were no cases of poliomyelitis confirmed in 1966.

(*c*) *Immunisation against Diphtheria and Tetanus.*

During 1966 almost twice as many school children, as compared with the previous year, received at school primary injections against diphtheria and tetanus, and the number of reinforcing injections was in fact more than double the figure for 1965. The actual numbers were:—

	1966	1965
Primary Injections	3,048	1,713
Reinforcing Injections	3,543	1,566

The number of children who had already received a primary course of immunisation against diphtheria and who were given a reinforcing injection at school was 3,071 as compared with 2,697 in 1965.

Parental consent was obtained and all arrangements for the immunisation of these children were made by Assistant County Medical Officers. Assisted by health visitors, the Assistant County Medical Officers, either on their own or with the help of local general medical practitioners, gave the injections.

(*d*) *B.C.G. Vaccination.*

Tuberculin testing and vaccination of all school children aged 11 years and upwards was carried out throughout the County, by health visitors and medical officers. Of the 9,608 children skin tested, 1,418 (14.8%) were already positive and therefore not eligible for vaccination. Protection against tuberculosis by B.C.G. vaccination was given to 7,485 children.

Table 32 shows details of the schemes carried out.

(e) *School Excursions Overseas—Vaccination and Inoculation.*

Parents of children going overseas in school parties were advised that protection against the typhoid group of fevers is a sensible precaution for anyone going abroad and that where children were vaccinated against smallpox in infancy, revaccination would increase their protection against this disease.

Facilities were available for inoculation and vaccination in the school clinics where a total of 393 children from 50 schools were inoculated against the typhoid fevers and 622 were revaccinated against smallpox. The latter figure showed a tremendous increase over the 130 for the previous year. This is accounted for by the fact that International Certificates of Vaccination were required by many countries following an outbreak of smallpox in the West Midlands.

HANDICAPPED PUPILS

The provision of special educational treatment for handicapped pupils continues to be one of the priorities in the County's development scheme.

The following figures show the distribution of handicapped children in the various categories (more detail is given in Table 33.

Blind	27
Partially sighted	26
Deaf	51
Partially hearing	63
Physically handicapped	160
Delicate...	92
Epileptic	11
Educationally sub-normal	1,151
Maladjusted	410
Speech Defective	896

(a) *Blind and Partially Sighted.*

Blind Pupils:—

One pupil was examined during the year by a School Medical Officer, and after subsequent examination by a consultant ophthalmologist was found to need education in a special school for the blind.

At the end of the year there were 27 pupils in such schools.

Partially-Sighted:—

Five pupils were recommended for entry to special schools for the partially-sighted, and at the end of the year four were still awaiting admission.

(b) *Deaf and Partially Hearing.*

Deaf Pupils:—

Of the children examined during the year five were recommended for education in special schools for deaf children. At the end of the year there were 51 children in such schools, and none awaiting admission.

Partially-Hearing Pupils:—

Eight of the pupils examined were subsequently recommended for admission to units for partially-hearing children.

The six units for partially-hearing children are meeting the needs of this type of school child.

Fifty-seven children made commendable progress. The junior units which cater for infants are full to capacity and this created certain delays in the admission of pupils in this age group. The problem will be relieved by the establishment of three nursery infant units in May or June, 1967.

During 1966 four trainee audiometricians were appointed. After a short introductory course they were sent to Manchester University for course under Professor Taylor. On their return they continued with practical training and are now fully operative within the service.

This addition to the staff has made possible a great increase in the numbers tested in the Infant Schools, as shown in the following tables.

The Sweep Test method of finding children with impaired hearing still appears to be the most satisfactory, though some children who fail this test do so for a variety of reasons other than hearing difficulty. It is considered safer, however, to fail and re-test later, than to risk a real hearing loss being undetected.

The figures for Sweep Testing during the year are as follows:—

	Boys.	*Girls.*	*Total.*
Tested	9,748	9,498	19,246
Failed	1,156	1,153	2,309
% Incidence	11.85	12.13	11.99

Children whose hearing is suspect are referred for investigation to the nearest school clinic, where the school medical officer and audiometrician are in attendance. Together with other referrals, e.g. speech therapy cases, children being examined as possibly educationally sub-normal referrals by head teachers and health visitors, and children referred from routine medical inspection, they have a complete test of hearing and examination.

The resultant figures for 1966 are as follows:—

Number of Appointments.	*Referred to E.N.T. Consultant.*	*For further Observation.*	*Did not keep Appointment.*	*No further Action.*
3,519	353	1,301	900	965

(c) *Physically Handicapped Pupils.*

The number of children with physical handicaps examined for the first time during the year was 47 and 195 were re-examined.

Of these children 142 were found to be able to cope with the conditions of the ordinary school, 11 were recommended for admission to special schools and 88 for tuition at home. At the end of the year there were no children awaiting places in special schools. Only one child was considered to be unsuitable for any type of education.

Fifty-two physically handicapped children were attending special schools, 55 were receiving tuition at home and 53 in hospital.

(d) *Delicate Pupils.*

A total of 58 children were examined or re-examined during the year and 21 were found capable of attending ordinary schools. 25 were recommended for special schools, 12 for home tuition and review at a later date.

At the end of the year 71 delicate children were attending special schools, 9 were receiving home tuition and 12 were awaiting admission to special schools.

(e) *Epileptic Children.*

Six children were examined or re-examined during the year.

There were two epileptic children awaiting places in special schools by the end of the year. The number at present in special schools is eight, and one child is receiving education at home.

(f) *Educationally Sub-Normal Children.*

The number of these children examined during the year was 284 and of these 159 were recommended for admission to special schools. In addition, 73 children were found to be unsuitable for education in school.

The Liaison Committee, consisting of Health, Education and Children's Committee representatives met quarterly to consider reports from the officers concerned, including the County Youth Employment Officer, on the progress and after-care of children needing supervision after leaving school.

(g) *Maladjusted Children.*

A total of 188 new cases attended child guidance centres during the year. At the end of the year there were fourteen county boys in the Leafield Hostel, and generally speaking their progress has been good. On the 1st April, 1966, Redworth Hall which was formerly a school for delicate pupils, became a residential school for maladjusted boys aged 11-16 years. It is intended to provide 50 places and at the end of the year there were 36 boys at the school.

(*h*) *Speech Defective Pupils.*

A total of five hundred and fifty four children received treatment in the Speech Clinics run by the School Health Service during 1966 whilst a further three hundred and forty two children from the Administrative County were known to have received treatment at the hospital clinics.

Diabetic and Epileptic Holiday Camps.

Arrangements were made for children to attend holiday camps under the auspices of the British Diabetic Association and the British Epilepsy Association as follows:—

The British Diabetic Association:—

Stoke House, Brunswick, Sussex	2
Young Adventurers Camp, Suffolk	3
St. Monica's Hostel, Kingsdown	1
Castlecraig Residential School, Peebles	2

The British Epilepsy Association:—

Boys' Village, St. Athan, Wales	2
City of Coventry's Boarding School, Cleobury Mortimer	1

MISCELLANEOUS MEDICAL EXAMINATIONS

Medical examinations other than periodic examinations in schools were undertaken as in previous years. Details are given below. (Figures in brackets refer to 1965).

(*a*) Examination under Section 18 of the Children and Young Persons Act, 1933.

These examinations are of children between the ages of 14 and 16 and are required to determine the fitness of children to receive employment licences and badges.

Part-time employment is usually that of newsboy, errand boy or shop assistant.

No. of children examined	488	(349)
No. of children unfit to be employed	1	(none)

(*b*) Examination under Section 22 of the Children and Young Persons Act, 1933.

These are examinations of children desiring to take part in entertainments.

No. of children examined	1	(3)
No. of children unfit	none	(none)

(*c*) Juvenile Courts.

No. of children or young persons examined arising out of proceedings in Juvenile Courts	none	(5)

(*d*) Candidates for Royal Air Force. Apprentices or Boy Entrants	none	(none)
(*e*) Candidates for admission to courses of training for teaching and to the teaching profession	963	(965)
(*f*) Superannuation cases	378	(534)

Members of the staff have given talks to parent-teacher associations and other organisations during the year.

THE CHILD GUIDANCE SERVICE

The Child Guidance Service has again suffered from changes in staff, especially Educational Psychologists, and this has at times interrupted continuity. As regards Social Workers, the appointment of Miss S. Hutchinson to the Durham Clinic on the 1st September, however, has to some extent alleviated the problem, although, at the same time Mrs. von Leyden departed to the U.S.A. on a year's leave. Jarrow, however, is still without a Social Worker, although Miss Hutchinson has been able to give some time to the Bishop Auckland area.

There has been no change in the psychiatric staff, but they have increased the range of their services. Dr. Bruce is now visiting the Peterlee area regularly, and she has also taken over the psychiatric supervision of Leafield House Hostel. The opening of Redworth Hall School for the Maladjusted has necessitated the provision of an appropriate psychiatric service there and at present Dr. Walley attends for two sessions a week for diagnostic and therapeutic work.

Figures for attendances are as follows: (attendances are given separately for Jarrow but the Durham, Bishop Auckland and Peterlee clinics are combined as several children attended at the Durham Centre and then were later transferred to the outlying clinics).

Psychiatrists:	New Cases:	Durham	156
		Jarrow	32

This included 24 cases seen at Durham and 2 at Jarrow at the request of the juvenile courts.

Follow-up and treatment sessions:	Durham	880
	Jarrow	61

Two domiciliary visits were made from the Durham Clinic.

Psychologists:	New Cases:	Durham	111
		Jarrow	27
	Additional Interviews:	Durham	546
		Jarrow	148
	School and home visits:	Durham	173
		Jarrow	65

Social Worker: (Durham only)

New Cases:	76
Additional Interviews ...	361
Home Visits	51

It is anticipated that during the coming year a greater stability of staff will be achieved which will enable us to cope with the steadily increasing demand for this service.

SPEECH THERAPY

Speech Therapy presents what is perhaps the least satisfactory aspect of the School Health Service in the County. As in previous years the biggest problem is that of recruitment. At the beginning of 1966 there were vacancies for four full-time Speech Therapists out of a total establishment of eight and during the year the County Council unfortunately lost the services of Mrs. C. Tate, Senior Speech Therapist who resigned on the 31st August. Because of Mrs. Tate's departure it was necessary to close the Speech Clinics at Newton Aycliffe and Bishop Auckland and, except for one or two extremely difficult cases, it was not possible to offer treatment elsewhere to the children concerned.

Because of the staffing situation the County Council in November approved a scheme for a complete reorganisation of the Speech Therapy service in the County, which it is hoped will improve the efficiency of the service and at the same time have a favourable effect upon recruitment. The scheme provides for the division of the County into five areas each of which will have a school population large enough to warrant the employment of a Senior and two other Speech Therapists. The revised establishment also includes a Chief Speech Therapist who will be responsible for the supervision and co-ordination of the service throughout the administrative County, and liaison with speech therapy training establishments.

In spite of the difficulties every effort was made to provide as good a service as possible and in the areas where Clinics were in operation some new cases were taken on and the complete figures are as follows:—

	Boys.	*Girls.*	*Total.*
Number of children on register in January, 1966	411	162	573
Number of new cases admitted for treatment	126	71	197
Number of children discharged	136	68	204
Number of children transferred	30	9	39
Number of children on register in December, 1966	371	156	527

DENTAL SERVICE

The Principal School Dental Officer reports as follows:—

At the beginning of 1966 we had the services of 24 full-time School Dental Officers and 6 part-time School Dental Officers, making an equivalent of 26 School Dental Officers. At the end of the year we had 19 full-time officers and 9 part-time officers, making an equivalent of 22.5 School Dental Officers. These numbers do not include the excepted districts of Easington and Stockton.

In February, Mobile Dental Van No. 8 was delivered, and in April the Dental Surgery in the new Washington School Clinic came into operation.

On 18th, 19th and 20th April a Root Canal Therapy course was held at Newcastle Dental Hospital, and proved to be of great interest and help to the four School Dental Officers who attended it.

In May three of our Dental Surgery assistants took the British Dental Nurses' Examination, one of whom was successful.

In June, one School Dental Officer was allowed to attend Shotley Bridge Hospital to carry out orthodontic work under the supervision of the Consultant Orthodontist.

In July, at the County Show, a dental van was on display and although the number of people attending the Show was low, many were very interested to see the interior of the mobile dental van. The Apple and Pear Marketing Board kindly sent to us four boxes of apples for distribution at the County Show. We are most grateful for their generosity in sending the apples.

During September a Dental Officer from the Department of Education and Science visited the County. The suggestions he made as to the running of the service proved very helpful.

In October, 1966, we were fortunate enough to secure the services of a third Consultant Anaesthetist for the clinics in the Sunderland area. In November we were successful in obtaining the services of a Dental Hygienist whose work in the field of Dental Health Education in schools is proving to be of value.

In November, a mobile dental van visited Redworth Hall, which is now a school for maladjusted boys, and the children were inspected and treated successfully.

Close Liaison with the Dental Hospitals and general dental practitioners has been maintained.

Inspection and Treatment.

A marked reduction in the number of fillings of some 7,934 as compared with the previous year is noted. Also the number of extractions has risen by 285. This no doubt is due to the fact that we have had many resignations from School Dental Officers during the year and have been unable to secure replacements for them all.

Once again our thanks to Newcastle Dental Hospital, Sunderland General Hospital, North Ormesby Hospital, Dryburn Hospital and to the Consultant Orthodontists, particularly in the Sunderland area where the Consultant Orthodontist visits Durham School Clinic once per month to give valuable help and advice; and also to the radiographers and staff who have given us such valuable assistance.

NURSING AND HEALTH VISITOR SERVICES

The County Superintendent Health Visitor reports as follows:—

The establishment of school nurses is 35 and at the 31st December, 1966, there were 27 in post.

School nurses assisted the doctors on 480 days when carrying out routine medical examinations in the schools. 182 days were spent in assisting in cleanliness surveys, 1,045 days were spent in school clinics. School nurses were also in attendance whilst the school medical officers examined potential employees for the County Council, college entrants for teacher training and handicapped pupils, both physical and mental. 3,141 home visits were paid and 26 days spent on escort duties.

During 1966, 100 of the health visitors had a part of their time devoted to school work. It is estimated that this time amounted in all to a total of 1,705 days.

A total of 11,589 visits were paid to homes and 1,895 visits to schools, other than school visits as part of the immunisation and vaccination programmes. An analysis of these visits is set out in Table 34.

The health visitors spent 163 days at school clinics, 459 days conducting medical inspections, 155 days escorting children to special schools and 76 days at nursery schools.

During the cleanliness surveys carried out in the Administrative County area, 55,005 girls were examined in 552 departments of 479 schools, and it was found that 3,254 were unclean, i.e. showed evidence of nits or vermin. (90 verminous). Table 34 shows the number of subsequent examinations of the unclean children, and provides also a comparision with previous years.

The percentage of clean scholars continues to show a slight improvement.

In 104 schools, all the children were found to be clean.

9,656 visits were paid to the homes of the children who were found to be unclean.

PROVISION OF SCHOOL MEALS

Plans have been approved for the provision of Kitchen Dining Rooms at 10 new schools and for kitchen facilities at 6 existing schools at present being supplied with meals from Central Kitchens.

Details of new kitchen dining rooms opened during 1966 are shown in Table 35.

Statistics showing the position on 31st December, 1966 :—

Central Kitchens	32
School Canteens—	
Grammar	24
Primary and Modern	166
Nursery...	20
School Dining Centres	371

Meals supplied during 12 months ending 31st December, 1966 :—

Free	2,270,234
on Payment	13,579,885
TOTAL ...	15,850,119

The Education Committee is grateful for the continued assistance given by the teaching staffs to the School Meals Service.

PART III

STATISTICAL TABLES

A. HEALTH AND WELFARE

TABLE I.

Population, Birth Rate, Death-Rate, etc., within the Administrative County of Durham, 1966.

Districts.	Medical Officer of Health.	Area in Acres.	Registrar General's estimated Resident Population 1966.	Live Births.	Still Births.	Deaths.	Birth-rate.	Death-rate.	Death-rate from seven Principal Infective Diseases.	Infant Mortality-rate per 1,000 Births.	Phthisis Death-rate.	Total Tuberculosis Death-rate.	Lung Diseases Death-rate.	Deaths occurring outside District included.	Deaths occurring within District excluded.
Area No. 1.															
Blaydon U.D.	J. A. Dryden, M.A., B.Sc., M.B., B.Chir., D.P.H., D.I.H.	9,235	31,610	600	13	341	19.0	10.8	0.03	8	—	—	1.39	182	37
Ryton U.D.	Do.	5,145	14,460	260	9	166	18.0	11.5	—	15	0.14	0.14	1.38	82	7
Whickham U.D.	Do.	6,074	27,530	501	12	307	18.2	11.2	—	20	0.15	0.18	1.13	118	215
		20,454	73,600	1,361	34	814	18.5	11.1	0.01	14	0.08	0.10	1.29	382	259
Area No. 2.															
Jarrow M.B.	H. C. Weir, M.A., M.B., B.Ch., B.A.O., D.P.H.	1,697	26,520	455	14	319	17.2	12.0	0.04	20	0.11	0.15	1.55	135	9
Felling U.D.	Do.	3,259	38,780	624	13	376	16.1	9.7	—	21	0.03	0.03	1.08	193	5
Hebburn U.D.	Do.	1,554	25,030	452	12	274	18.1	10.9	—	24	0.08	0.08	1.20	108	10
		6,510	90,330	1,531	39	969	16.9	10.7	0.01	22	0.07	0.08	1.25	436	24
Area No. 3.															
Consett U.D.	R. Hill, M.B., B.Ch., D.P.H.	10,042	37,600	597	13	416	15.9	11.1	0.03	20	0.05	0.05	1.12	80	411
Stanley U.D.	Do.	12,659	44,860	721	11	567	16.1	12.6	0.02	21	0.13	0.13	1.03	326	8
Lanchester R.D.	Do.	44,243	14,710	218	2	225	14.8	15.3	—	37	0.20	0.20	2.31	62	154
		66,944	97,170	1,536	26	1,208	15.8	12.4	0.02	23	0.11	0.11	1.26	468	573
Area No. 4.															
Chester-le-Street U.D.	J. L. Siddle, M.B., B.S., D.P.H.	2,656	19,980	372	5	285	18.6	14.3	—	16	0.05	0.05	2.75	53	254
Chester-le-Street R.D.	Do.	22,223	45,090	820	7	497	18.2	11.0	—	13	0.07	0.07	1.84	278	3
		24,879	65,070	1,192	12	782	18.3	12.0	—	14	0.06	0.06	2.12	331	257
Area No. 5.															
Boldon U.D.	H. C. Weir, M.A., M.B., B.Ch., B.A.O., D.P.H.	7,640	26,120	453	9	267	17.3	10.2	0.04	13	—	—	1.03	119	15
Hetton U.D.	P. A. Y. Narayanan, M.B., B.S., D.T.M. & H., D.P.H.	4,551	17,120	227	6	189	13.3	11.0	—	26	—	—	1.87	106	2
Houghton-le-Spring U.D.	Do.	5,026	31,190	538	8	360	17.2	11.5	—	26	0.06	0.06	1.57	202	7
Seaham U.D.	J. W. A. Rodgers, M.B., B.Ch., D.P.H.	2,469	25,330	388	6	280	15.3	11.1	0.04	26	0.08	0.08	1.74	119	79
Washington U.D.	P. A. Y. Narayanan, M.B., B.S., D.T.M & H., D.P.H.	5,758	19,870	330	6	230	16.6	11.6	—	27	0.10	0.10	1.76	111	6
Sunderland R.D.	Do.	6,734	30,160	599	8	330	19.9	10.9	—	15	0.10	0.10	1.79	105	460
		32,178	149,790	2,535	43	1,656	16.9	11.1	0.01	21	0.06	0.06	1.61	762	569
Area No. 6.															
Crook & Willington U.D.	G. A. Macgregor, M.D., D.P.H.	15,476	24,040	355	4	385	14.8	16.0	—	17	0.04	0.04	2.21	138	25
Tow Law U.D.	Do.	477	2,830	41	—	44	14.5	15.5	—	49	—	—	2.47	18	1
Weardale R.D.	Do.	99,513	8,170	114	3	145	14.0	17.7	—	9	—	—	1.35	43	6
		115,466	35,040	510	7	574	14.6	16.4	—	18	0.03	0.03	2.03	199	32
Area No. 7.															
Durham M.B.	R. G. Drummond, M.B., Ch.B., D.P.H.	4,578	24,210	324	2	281	13.4	11.6	—	6	—	—	1.90	27	417
Brandon & Byshottles U.D.	Do.	8,224	19,190	293	5	250	15.3	13.0	0.05	14	0.16	0.21	1.93	107	7
Durham R.D.	Do.	34,068	37,160	671	13	428	18.1	11.5	0.05	13	0.03	0.03	1.48	197	7
		46,870	80,560	1,288	20	959	16.0	11.9	0.04	12	0.05	0.06	1.71	331	431
Area No. 8.															
Barnard Castle U.D.	A. S. M. Wilson, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.	559	5,360	80	4	98	14.9	18.3	—	—	0.19	0.19	2.61	19	35
Barnard Castle R.D.	Do.	110,118	17,110	282	8	196	16.5	11.5	—	32	—	—	0.94	94	8
		110,677	22,470	362	12	294	16.1	13.1	—	25	0.04	0.04	1.34	113	43
Area No. 9.															
Bishop Auckland U.D.	J. M. Hegarty, M.B., B.Ch., B.A.O., D.P.H.	9,332	34,780	607	9	427	17.5	12.3	—	30	—	—	1.50	35	415
Shildon U.D.	Do.	4,827	13,890	237	2	174	17.1	12.5	—	13	0.07	0.07	1.30	82	6
Spennymoor U.D.	Do.	7,543	18,550	260	3	233	14.0	12.6	—	31	—	—	1.56	106	3
		21,702	67,220	1,104	14	834	16.4	12.4	—	26	0.01	0.01	1.47	223	424
Area No. 10.															
Hartlepool M.B.	L. R. Benham, M.B., B.S., D.P.H.	1,473	18,110	290	5	188	16.0	10.4	—	48	0.06	0.06	1.66	96	45
Billingham U.D.	Do.	7,855	34,890	700	14	306	20.1	8.8	—	33	0.09	0.09	0.83	179	11
Darlington R.D.	M. W. Rodgers, M.B., B.Ch., B.A.O., D.P.H.	45,479	27,940	530	5	246	19.0	8.8	0.04	21	—	0.04	1.25	101	22
Sedgefield R.D.	Do.	39,057	35,200	560	5	575	15.9	16.3	—	21	0.17	0.17	2.76	83	471
Stockton R.D.	L. R. Benham, M.B., B.S., D.P.H.	40,614	14,270	253	5	101	17.7	7.1	—	16	0.07	0.07	0.91	57	7
		134,478	130,410	2,333	34	1,416	17.9	10.9	0.01	27	0.08	0.09	1.56	516	556
Easington R.D.	J. W. A. Rodgers, M.B., B.Ch., D.P.H.	34,653	86,100	1,544	21	986	17.9	11.5	0.05	23	0.12	0.14	1.94	348	147
Stockton M.B.	H. J. Peters, M.B., B.S., B.Hy., D.P.H., D.P.A.	5,465	83,260	1,701	34	964	20.4	11.6	0.04	22	0.17	0.17	1.60	323	165
Administrative County		620,276	981,020	16,997	296	11,456	17.3	11.7	0.02	21	0.08	0.09	1.58	4,432	3,480

TABLE 2.

ADMINISTRATIVE COUNTY OF DURHAM.

COMPARISON OF DEATHS IN CERTAIN AGE GROUPS, 1900-1966.

Year.	Death Rate.	Percentage of Total Deaths.						
		Under 1 year.	1-14 years.	15-24 years.	25-44 years.	45-64 years.	65-74 years.	75 years and over.
1900	18.6	32.0	17.7	5.5	—	—	—	—
					26.9		17.9	
1910	14.3	29.1	16.6	5.2	—	—	—	—
					28.2		20.9	
1920	11.5	25.4	15.6	5.1	11.7	18.5	—	—
					30.2		23.7	
1930	11.2	13.7	10.6	5.3	11.7	23.6	—	—
					35.3		35.1	
1940	13.1	8.4	4.9	3.9	10.0	26.3	24.4	22.1
					36.3		46.5	
1950	11.8	6.1	1.9	1.6	6.3	23.8	27.7	32.6
					30.1		60.3	
1960	11.5	4.5	1.1	0.8	3.9	25.0	26.8	37.9
					28.9		64.7	
1966	11.7	3.1	0.9	1.0	3.5	25.5	27.3	38.7
					29.0		66.0	

TABLE 3.

ADMINISTRATIVE COUNTY OF DURHAM.—CLASSIFICATION OF DEATHS AS SUPPLIED BY THE REGISTRAR GENERAL, 1966.

Causes of Death.	Total	M	F	*Urban Districts M	*Urban Districts F	Rural Districts M	Rural Districts F	Age Periods. Male. Under 4 weeks	4 weeks to 1 year	1—	5—	15—	25—	35—	45—	55—	65—	75 & over	Female. Under 4 weeks	4 weeks to 1 year	1—	5—	15—	25—	35—	45—	55—	65—	75 & over
1. Tuberculosis, respiratory	78	61	17	39	12	22	5	—	—	—	—	—	—	4	8	19	21	9	—	—	—	—	—	2	4	4	4	3	—
2. Tuberculosis, other	6	4	2	1	2	3	—	—	—	—	1	—	—	1	1	1	—	—	—	—	—	—	—	—	1	—	1	—	—
3. Syphilitic disease	17	12	5	7	2	5	3	—	—	—	—	—	—	—	2	6	1	3	—	—	—	—	—	—	—	—	—	1	4
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal infections	3	2	1	2	1	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—
7. Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles	1	1	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic diseases ..	19	11	8	8	6	3	2	1	—	—	—	1	—	—	4	2	1	2	—	2	1	—	—	—	—	1	1	1	2
10. Malignant neoplasm, stomach	339	214	125	163	89	51	36	—	—	—	—	—	1	5	25	62	73	48	—	—	—	—	1	1	8	12	20	38	45
11. Malignant neoplasm, lung, bronchus ..	509	449	60	323	37	126	23	—	—	—	—	—	3	17	59	174	151	45	—	—	—	—	—	1	—	13	14	24	8
12. Malignant neoplasm, breast	178	5	173	5	121	—	52	—	—	—	—	—	—	1	—	1	2	1	—	—	—	—	—	3	17	37	44	49	23
13. Malignant neoplasm, uterus	82	—	82	—	50	—	32	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8	16	26	13	19
14. Other malignant & lymphatic neoplasms	935	527	408	368	295	159	113	—	1	2	1	5	6	28	46	129	165	144	—	—	1	—	2	10	11	48	87	120	129
15. Leukaemia, aleukaemia	57	33	24	20	14	13	10	—	—	—	2	3	1	—	4	6	11	6	—	—	1	2	1	1	2	—	5	4	8
16. Diabetes	84	28	56	17	34	11	22	—	—	—	—	—	—	—	2	6	14	6	—	—	—	—	—	—	—	2	8	21	25
17. Vascular lesions of nervous system ..	1,608	749	859	493	564	256	295	—	1	—	—	—	4	8	40	122	232	342	—	—	—	—	2	3	7	31	80	234	502
18. Coronary disease, angina	2,565	1,528	1,037	1,059	695	469	342	—	—	—	—	—	9	53	185	437	486	358	—	1	—	—	—	2	10	40	168	364	452
19. Hypertension with heart disease.. ..	162	68	94	53	55	15	39	—	—	—	—	—	—	1	6	16	20	25	—	—	—	—	—	—	—	4	5	36	49
20. Other heart disease	878	390	488	265	339	125	149	—	2	1	1	1	3	9	19	51	99	204	—	—	—	1	—	3	3	27	38	99	317
21. Other circulatory disease	546	244	302	164	194	80	108	—	—	1	—	2	—	4	8	26	71	132	—	—	—	—	—	1	2	13	20	40	226
22. Influenza	66	37	29	23	20	14	9	—	—	—	—	—	—	—	5	7	13	12	—	1	—	—	—	—	3	2	6	3	17
23. Pneumonia	729	366	363	236	199	130	164	11	29	4	1	4	—	6	18	42	76	175	1	11	6	1	3	1	3	7	24	68	238
24. Bronchitis	756	579	177	392	116	187	61	—	5	—	—	—	4	3	24	142	226	175	—	1	1	—	1	1	—	10	27	46	90
25. Other diseases of respiratory system ..	133	94	39	66	30	28	9	—	—	—	—	1	1	1	5	34	31	21	—	1	—	—	—	—	2	1	5	4	26
26. Ulcer of stomach and duodenum ..	71	52	19	31	15	21	4	—	—	—	—	—	—	—	7	9	17	19	—	—	—	—	—	—	1	—	2	2	14
27. Gastritis, enteritis and diarrhoea ..	53	22	31	18	21	4	10	1	4	1	—	—	—	—	1	7	1	7	3	5	2	—	2	—	1	2	1	3	12
28. Nephritis and nephrosis	62	37	25	26	18	11	7	—	—	—	2	—	1	2	6	7	11	8	—	—	—	—	—	—	2	3	3	9	8
29. Hyperplasia of prostate	38	38	—	24	—	14	—	—	—	—	—	—	—	—	—	1	9	28	—	—	—	—	—	—	—	—	—	—	—
30. Pregnancy, childbirth, abortion	2	—	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—
31. Congenital malformations	113	60	53	41	33	19	20	30	13	3	3	1	—	—	3	7	—	—	22	16	3	2	3	—	—	3	1	2	1
32. Other defined and ill-defined diseases ..	864	395	469	260	323	135	146	99	5	1	5	12	9	13	26	53	55	117	72	4	4	4	6	8	19	17	47	102	186
33. Motor vehicle accidents	137	107	30	67	19	40	11	—	—	8	7	26	6	12	19	13	5	11	—	—	1	2	4	2	4	2	5	6	4
34. All other accidents	285	146	139	93	94	53	45	—	6	10	12	19	8	16	14	12	12	37	1	7	3	2	2	2	2	7	9	19	85
35. Suicide	74	45	29	34	23	11	6	—	—	—	—	3	3	5	13	14	2	5	—	—	—	—	2	—	5	9	5	6	2
36. Homicide and operations of war ..	6	4	2	4	2	—	—	—	—	—	1	1	—	1	—	—	1	—	—	—	—	—	1	1	—	—	—	—	—
Total	11,456	6,308	5,148	4,302	3,425	2,006	1,723	143	66	31	36	80	59	190	551	1,406	1,806	1,940	99	49	23	15	30	43	113	311	656	1,317	2,492

*Including Municipal Boroughs of Durham, Hartlepool, Jarrow and Stockton.

TABLE 4.

Comparative Vital Statistics, Administrative County of Durham and England and Wales, 1966.

	Rates per 1,000 Population.										Rates per 1,000 Live Births.		Rates per 1,000 Total (Live and Still) Births.
			Deaths.								Deaths		
	Live Births	Still Births	All Causes	Typhoid and Para-Typhoid	Whooping Cough	Diphtheria	Tuberculosis	Influenza	Acute Poliomyelitis	Pneumonia	Under one year—all causes	Enteritis and Diarrhoea Under 2 years	Maternal Mortality.
Durham County ...	17.3	0.30	11.7	—	—	—	0.09	0.07	—	0.74	21.0	0.94	0.12
*England and Wales	17.7	0.28	11.7	—	0.00	0.00	0.05	0.07	0.00	0.86	19.0	†	0.26

* Provisional. † Not available.

TABLE 5.

Administrative County of Durham.

COMPARATIVE BIRTH AND INFANT MORTALITY STATISTICS, 1957-1966.

Year.	Births.	Deaths under 1 year.	Infant Mortality Rate.	Perinatal Mortality Rate.	Early Neo-Natal Mortality Rate.	Infant Mortality Rate. 1 week—1 year.
1957	17,063	462	27	39.8	14.9	11.9
1958	17,414	443	25	37.8	14.9	10.3
1959	16,976	453	27	39.1	16.0	10.5
1960	17,622	488	28	40.1	17.0	10.4
1961	17,411	407	23	35.7	13.8	9.3
1962	17,910	467	26	35.7	16.4	9.5
1963	17,639	396	22	32.4	13.5	8.8
1964	17,726	406	23	33.5	13.8	8.8
1965	17,601	362	21	30.7	12.0	8.4
1966	16,997	357	21	28.6	11.6	9.2

TABLE 6.

HOME NURSING STATISTICS.

Year.	Staff.		General Medical.		General Surgical.		Infectious Diseases.		Tuberculosis.		Maternal Complications		Others.		Total.	
	Whole-time	Part-time	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits
1965	121	28	12,084	314,700	3,805	85,824	21	251	399	27,539	190	2,415	—	7,307	16,499	438,036
1966	115	25	11,514	307,099	3,601	84,779	22	378	381	22,277	116	1,657	—	7,948	15,634	424,138

Year.	Patients included in above Table who were 65 or over at the time of the first visit during the year.		Children included in above Table who were under 5 at the time of the first visit during the year.		Patients included in above Table who have had more than 24 visits during the year.	
	Cases	Visits	Cases	Visits	Cases	Visits
1965	7,835	254,859	690	5,498	4,230	284,132
1966	7,963	258,591	608	4,727	5,642	333,187

TABLE 7.

ADMINISTRATIVE COUNTY OF DURHAM.

Number of Persons Vaccinated or Re-vaccinated against Smallpox for which records were received during the year 1966.

District.	VACCINATED Age at date of Vaccination.						RE-VACCINATED Age at date of Re-vaccination.					
	Under 1	1	2 to 4	5 to 15	16 or over	Total	Under 1	1	2 to 4	5 to 15	16 or over	Total
Area No. 1.												
Blaydon U.D.	21	252	22	3	1	299	—	—	—	3	2	5
Ryton U.D.	3	133	27	—	1	164	—	—	—	—	4	4
Whickham U.D. ...	10	263	30	11	18	332	—	—	—	12	31	43
Area No. 2.												
Jarrow M.B.	35	160	17	2	5	219	—	—	—	6	2	8
Felling U.D.	19	208	60	15	50	352	—	—	3	14	69	86
Hebburn U.D.	37	135	21	6	2	201	—	—	—	—	—	—
Area No. 3.												
Consett U.D.	29	291	40	21	7	388	—	—	6	9	19	34
Stanley U.D.	6	262	32	19	24	343	—	—	1	5	40	46
Lanchester R.D. ...	10	94	27	15	16	162	—	—	1	13	36	50
Area No. 4.												
Chester-le-Street U.D.	7	147	15	4	17	190	—	—	2	3	17	22
Chester-le-Street R.D.	10	267	31	24	54	386	—	—	—	12	72	84
Area No. 5.												
Boldon U.D.	14	188	32	21	28	283	—	—	2	17	73	92
Hetton U.D.	1	39	3	3	17	63	—	—	1	1	18	20
Houghton-le-Spring U.D.	5	136	28	7	12	188	—	—	1	3	12	16
Seaham U.D.	6	92	13	7	4	122	—	—	—	1	3	4
Washington U.D. ...	11	142	18	3	1	175	—	—	—	—	6	6
Sunderland R.D. ...	34	185	38	29	26	312	—	—	2	13	90	105
Area No. 6.												
Crook & Willington U.D.	10	119	29	3	10	171	—	—	2	1	9	12
Tow Law U.D. ...	2	13	3	1	2	21	—	—	—	—	4	4
Weardale R.D.	9	38	10	42	3	102	—	—	—	4	7	11
Area No. 7.												
Durham M.B.	10	111	20	2	4	147	—	—	—	7	9	16
Brandon & Byshottles U.D.	3	63	18	4	24	112	—	—	—	1	9	10
Durham R.D.	23	227	28	6	16	300	—	—	2	12	33	47
Area No. 8.												
Barnard Castle U.D. ...	—	8	2	9	8	27	—	—	—	36	42	78
Barnard Castle R.D. ...	4	34	19	12	8	77	—	—	—	2	14	16
Area No. 9.												
Bishop Auckland U.D.	29	205	25	10	10	279	—	—	—	—	33	33
Shildon U.D.	3	56	22	2	1	84	—	—	—	1	7	8
Spennymoor U.D. ...	4	83	17	7	26	137	—	—	—	2	34	36
Area No. 10.												
Hartlepool M.B. ...	9	13	3	3	2	30	—	—	—	1	10	11
Billingham U.D. ...	57	168	48	28	71	372	—	—	3	33	169	205
Darlington R.D. ...	9	89	42	19	10	169	—	—	1	9	22	32
Sedgefield R.D. ...	12	196	35	22	74	339	—	—	—	13	241	254
Stockton R.D.	11	87	25	2	1	126	—	—	1	1	10	12
Easington R.D.	68	333	67	15	133	616	—	—	1	9	214	224
Stockton M.B.	97	266	161	57	55	636	—	—	2	10	39	51
ADMINISTRATIVE COUNTY	618	5,103	1028	434	741	7,924	—	—	31	254	1400	1685

TABLE 8.

POLIOMYELITIS, DIPHTHERIA, WHOOPING COUGH AND TETANUS IMMUNISATION

No. of persons immunised against Poliomyelitis, Diphtheria, Whooping Cough and Tetanus for which records were received during the year ended 31st December, 1966

Type of Vaccine or Dose	Completed Primary Courses					Others Under Age 16	Total	Reinforcing Doses					Others Under Age 16	Total
	Year of Birth							Year of Birth						
	1966	1965	1964	1963	1959-62			1966	1965	1964	1963	1959-62		
Quadruple DTPP	33	156	22	6	18	2	237	—	4	18	5	43	9	79
Triple DTP	4,750	6,674	752	293	490	62	13,021	—	1,146	2,784	461	2,818	515	7,724
Diphtheria/Pertussis	—	—	—	—	—	1	1	—	—	—	—	9	2	11
Diphtheria/Tetanus	29	87	77	38	3,250	894	4,375	—	66	226	72	5,534	696	6,594
Diphtheria	1	—	—	—	5	8	14	—	4	3	—	2,641	1,153	3,801
Pertussis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tetanus	3	1	1	1	578	66	650	—	—	2	1	412	120	535
Salk	2	28	14	5	34	21	104	—	8	8	7	11	4	38
Sabin (Oral)	2,123	8,305	1,370	683	3,264	1,225	16,970	—	264	354	156	8,846	2,198	11,818
TOTALS Diphtheria	4,813	6,917	851	337	3,763	967	17,648	—	1,220	3,031	538	11,045	2,375	18,209
Whooping Cough	4,783	6,830	774	299	508	65	13,259	—	1,150	2,802	466	2,870	526	7,814
Tetanus	4,815	6,918	852	338	4,336	1,024	18,283	—	1,216	3,030	539	8,807	1,340	14,932
Poliomyelitis	2,158	8,489	1,406	694	3,316	1,248	17,311	—	276	380	168	8,900	2,211	11,935

TABLE 9.

ADMINISTRATIVE COUNTY OF DURHAM.

AMBULANCE SERVICE—STATISTICS, 1948-66.

Year	No. of Journeys	Out-Patients only			General Service‡			Emergency Service			Totals General and Emergency Cases			Total Mileage	Ambulances	Men
		Stretcher cases	Sitting cases	Total	Stretcher cases	Sitting cases	Total	Stretcher cases	Sitting cases	Total	Stretcher cases	Sitting cases	Total			
*1948	22,989	3,280	17,846	21,126	15,259	23,762	39,021	1,277	—	1,277	16,536	23,762	40,298	552,486	72	118
1949	61,906	7,395	63,463	70,858	29,609	84,995	114,604	2,321	1,428	3,749	31,930	86,423	118,353	1,501,047	92	248
1950	79,896	10,635	89,624	100,259	34,032	120,982	155,014	2,269	2,008	4,277	36,301	122,990	159,291	1,979,681	86	268
†1951	86,429	13,697	128,320	142,017	34,833	163,807	198,640	5,737	5,635	11,372	40,570	169,442	210,012	2,129,585	99	270
†1952	90,243	19,587	199,937	219,524	35,954	239,672	275,626	11,044	6,778	17,822	46,998	246,450	293,448	2,268,166	93	271
1953	92,329	18,527	197,915	216,442	34,374	240,721	275,095	12,322	7,373	19,695	46,696	248,094	294,790	2,286,856	91	272
1954	93,135	19,267	196,621	215,888	35,221	241,757	276,978	14,357	7,277	21,634	49,578	249,034	298,612	2,253,087	100	281
1955	90,796	18,220	208,783	227,003	33,559	254,652	288,211	15,424	7,553	22,977	48,983	262,205	311,188	2,303,313	97	272
1956	89,380	18,584	203,795	222,379	34,405	248,310	282,715	16,640	7,319	23,959	51,045	255,629	306,674	2,259,284	98	283
1957	91,504	17,691	203,104	220,795	34,781	249,720	284,501	18,071	7,480	25,551	52,852	257,200	310,052	2,269,711	91	277
1958	89,853	17,926	200,533	218,459	34,696	247,873	282,569	17,915	6,923	24,838	52,611	254,796	307,407	2,257,907	94	290
1959	86,380	15,996	199,211	215,207	31,788	244,302	276,090	18,657	6,596	25,253	50,445	250,898	301,343	2,212,705	86	289
1960	89,368	16,401	214,301	230,702	32,036	259,967	292,003	20,572	6,789	27,361	52,608	266,756	319,364	2,284,635	80	290
1961	88,588	17,296	232,206	249,502	32,311	276,423	308,734	21,890	6,395	28,285	54,201	282,818	337,019	2,318,275	90	286
1962	95,417	18,513	255,418	273,931	32,820	300,159	332,979	22,454	6,570	29,024	55,274	306,729	362,003	2,448,132	96	286
1963	95,865	18,808	273,080	291,888	32,984	319,428	352,412	24,168	6,789	30,957	57,152	326,217	383,369	2,554,115	92	291
1964	97,714	15,567	304,843	320,410	28,714	349,623	378,337	25,561	7,251	32,812	54,275	356,874	411,149	2,629,853	99	292
1965	96,072	13,165	297,131	310,296	26,029	340,653	366,682	25,530	7,814	33,344	51,559	348,467	400,026	2,600,320	117	286
1966	96,665	12,229	295,772	308,001	24,496	338,878	363,374	25,919	8,151	34,070	50,415	347,029	397,444	2,624,199	134	312

* Half year only.

† Part of the increase in the figures recording the patients carried is due to the revised method of annual costing laid down by the Ministry of Health in Circular 25/51, which became operative on 1st August, 1951.

‡ Includes figures shown under "OUT-PATIENTS ONLY".

TABLE 10.

ADMINISTRATIVE COUNTY OF DURHAM, 1966.

TUBERCULOSIS—NEW CASES AND MORTALITY.

Age Period.	New Cases.							Deaths.						
	Respiratory.			Non-Respiratory.			Total	Respiratory.			Non-Respiratory.			Total.
	M.	F.	T.	M.	F.	T.		M.	F.	T.	M.	F.	T.	
0	2	—	2	—	—	—	2	—	—	—	—	—	—	—
1	4	7	11	2	—	2	13	—	—	—	—	—	—	—
5	7	7	14	—	1	1	15	—	—	—	1	—	1	1
15	22	21	43	1	2	3	46	—	—	—	—	—	—	—
25	20	20	40	3	5	8	48	—	2	2	—	—	—	2
35	38	18	56	1	4	5	61	4	4	8	1	1	2	10
45	32	12	44	2	4	6	50	8	4	12	1	—	1	13
55	39	4	43	3	3	6	49	19	4	23	1	1	2	25
65	31	6	37	2	—	2	39	21	3	24	—	—	—	24
75 and upwards ...	6	1	7	2	—	2	9	9	—	9	—	—	—	9
Age Unknown	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ...	*201	*96	297	16	19	35	332	61	17	78	4	2	6	84

* includes one case coming to the knowledge of the District Medical Officer of Health otherwise than by formal notification.

TABLE 11.

Administrative County of Durham, 1966.

Notifications of tuberculosis in each urban and rural district of the administrative county during the period 1st January, 1966 to 31st December, 1966.

District.	Primary Notifications of new cases of Tuberculosis.			
	Respiratory.		Non-respiratory.	
	Males.	Females.	Males.	Females.
Area No. 1.				
Blaydon U.D.	2	4	—	—
Ryton U.D.	8	4	2	—
Whickham U.D.	6	1	2	1
Area No. 2.				
Jarrow M.B.	8	3	3	2
Felling U.D.	17	4	2	1
Hebburn U.D.	7	6	1	—
Area No. 3.				
Consett U.D.	5	4	1	1
Stanley U.D.	9	5	2	—
Lanchester R.D.	3	1	—	—
Area No. 4.				
Chester-le-Street U.D.	7	1	—	—
Chester-le-Street R.D.	12	5	—	—
Area No. 5.				
Boldon U.D.	10	6	—	—
Hetton U.D.	5	4	—	—
Houghton-le-Spring U.D.	13	4	—	3
Seaham U.D.	5	5	—	4
Washington U.D.	4	2	—	—
Sunderland R.D.	9	7	—	2
Area No. 6.				
Crook and Willington U.D.	4	1	—	—
Tow Law U.D.	—	—	—	—
Weardale R.D.	1	—	—	—
Area No. 7.				
Durham M.B.	6	1	—	—
Brandon and Byshottles U.D.	—	1	1	—
Durham R.D.	4	1	1	—
Area No. 8.				
Barnard Castle U.D.	1	—	—	—
Barnard Castle R.D.	—	1	—	1
Area No. 9.				
Bishop Auckland U.D.	9	2	—	—
Shildon U.D.	—	—	—	—
Spennymoor U.D.	6	—	—	—
Area No. 10.				
Hartlepool M.B.	3	1	—	—
Billingham U.D.	6	2	—	—
Darlington R.D.	3	1	—	—
Sedgefield R.D.	3	3	—	1
Stockton R.D.	1	1	—	—
Easington R.D.	10	5	—	3
Stockton M.B.	14	10	1	—
Administrative County	201	96	16	19

TABLE 12.

ADMINISTRATIVE COUNTY OF DURHAM, 1966.

DEATHS FROM RESPIRATORY TUBERCULOSIS.

District.	15-24		25-34		35-44		45-54		55-64		65-74		75 and upwards		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Area No. 1.																
Blaydon U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ryton U.D.	—	—	—	—	—	—	1	—	—	—	—	—	1	—	2	—
Whickham U.D.	—	—	—	—	2	—	—	1	—	—	1	—	—	—	3	1
Area No. 2.																
Jarrow M.B.	—	—	—	—	—	—	—	—	1	—	2	—	—	—	3	—
Felling U.D.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Hebburn U.D.	—	—	—	—	—	—	—	—	1	—	1	—	—	—	2	—
Area No. 3.																
Consett U.D.	—	—	—	—	—	—	1	—	—	—	—	—	1	—	2	—
Stanley U.D.	—	—	—	—	—	1	—	—	2	2	1	—	—	—	3	3
Lanchester R.D.	—	—	—	1	—	—	—	—	1	—	1	—	—	—	2	1
Area No. 4.																
Chester-le-Street U.D.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Chester-le-Street R.D.	—	—	—	—	—	1	—	—	1	—	—	—	1	—	2	1
Area No. 5.																
Boldon U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hetton U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Houghton-le-Spring U.D. ...	—	—	—	—	—	—	—	—	—	1	1	—	—	—	1	1
Seaham U.D.	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	2
Washington U.D....	—	—	—	—	1	—	1	—	—	—	—	—	—	—	2	—
Sunderland R.D.	—	—	—	—	—	—	—	—	2	—	1	—	—	—	3	—
Area No. 6.																
Crook and Willington U.D. ...	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Tow Law U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Weardale R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Area No. 7.																
Durham M.B.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Brandon and Byshottles U.D. ...	—	—	—	—	—	—	1	—	1	—	1	—	—	—	3	—
Durham R.D.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Area No. 8.																
Barnard Castle U.D. ...	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—
Barnard Castle R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Area No. 9.																
Bishop Auckland U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Shildon U.D.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Spennymoor U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Area No. 10.																
Hartlepool M.B.	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Billingham U.D.	—	—	—	—	—	1	—	1	1	—	—	—	—	—	1	2
Darlington R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Sedgefield R.D.	—	—	—	—	—	1	—	—	3	—	2	—	—	—	5	1
Stockton R.D.	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
Easington R.D.	—	—	—	—	—	—	—	1	3	—	2	1	3	—	8	2
Stockton M.B.	—	—	—	—	1	—	4	—	2	—	3	2	2	—	12	2
ADMINISTRATIVE COUNTY	—	—	—	2	4	4	8	4	19	4	21	3	9	—	61	17

TABLE 13.

Administrative County of Durham.

DEATHS FROM NON-RESPIRATORY TUBERCULOSIS.

Area No.	District.	Age Period.	Sex.	Number of deaths.
1	Whickham U.D.	5 — 14	M	1
2	Jarrow M.B.	55 — 64	F	1
7	Brandon U.D.	35 — 44	F	1
10	Darlington R.D.	45 — 54	M	1
—	Easington R.D.	35 — 44	M	1
		55 — 64	M	1

TABLE 14.

Administrative County of Durham.—New Cases and Deaths (with Death-rates and Attack-rates), 1937-1966.

TUBERCULOSIS.

	Respiratory.				Non-Respiratory.				Total.			
Year.	New Cases	Number of Deaths	*Death Rate	*Attack Rate	New Cases	Number of Deaths	*Death Rate	*Attack Rate	New Cases	Number of Deaths	*Death Rate	*Attack Rate
1937	740	523	0.59	0.84	530	133	0.15	0.60	1,270	656	0.74	1.43
1938	656	470	0.53	0.74	595	124	0.14	0.67	1,251	594	0.67	1.42
1939	705	509	0.58	0.80	520	121	0.14	0.59	1,225	630	0.72	1.39
1940	671	526	0.61	0.79	474	82	0.10	0.56	1,145	608	0.72	1.35
1941	770	542	0.65	0.92	481	106	0.13	0.57	1,251	648	0.77	1.49
1942	757	435	0.53	0.92	492	123	0.15	0.60	1,249	558	0.67	1.52
1943	836	514	0.63	1.03	530	90	0.11	0.65	1,366	604	0.74	1.68
1944	914	423	0.51	1.11	481	100	0.12	0.59	1,395	523	0.63	1.70
1945	913	458	0.55	1.10	514	104	0.13	0.62	1,427	562	0.68	1.72
1946	1,051	430	0.50	1.22	385	111	0.13	0.45	1,436	541	0.63	1.66
1947	1,008	516	0.59	1.16	338	96	0.11	0.39	1,346	612	0.70	1.55
1948	1,127	436	0.49	1.27	295	92	0.10	0.33	1,422	528	0.59	1.60
1949	1,067	428	0.47	1.18	273	74	0.08	0.30	1,340	502	0.56	1.48
1950	1,289	356	0.39	1.42	243	56	0.06	0.27	1,532	412	0.45	1.69
1951	1,179	321	0.36	1.31	212	48	0.05	0.24	1,391	369	0.41	1.55
1952	1,038	222	0.25	1.15	167	26	0.03	0.19	1,205	248	0.28	1.34
1953	917	221	0.24	1.01	144	24	0.03	0.16	1,061	245	0.27	1.17
1954	810	176	0.19	0.89	133	15	0.02	0.15	943	191	0.21	1.04
1955	707	162	0.18	0.77	115	22	0.02	0.13	822	184	0.20	0.90
1956	684	105	0.11	0.74	106	11	0.01	0.12	790	116	0.13	0.86
1957	632	125	0.13	0.68	107	11	0.01	0.12	739	136	0.15	0.80
1958	595	101	0.11	0.64	91	15	0.02	0.10	686	116	0.12	0.73
1959	480	94	0.10	0.51	77	8	0.01	0.08	557	102	0.11	0.59
1960	474	90	0.09	0.50	65	7	0.01	0.07	539	97	0.10	0.57
1961	418	74	0.08	0.44	74	3	0.003	0.08	492	77	0.08	0.52
1962	425	55	0.06	0.44	61	4	0.004	0.06	486	59	0.06	0.50
1963	352	54	0.06	0.36	58	5	0.005	0.06	410	59	0.06	0.42
1964	322	60	0.06	0.33	65	4	0.004	0.07	387	64	0.07	0.40
1965	257	68	0.07	0.26	49	6	0.006	0.05	306	74	0.08	0.31
1966	297	78	0.08	0.30	35	6	0.006	0.04	332	84	0.09	0.34

*Rates per 1,000 population.

TABLE 15.

ADMINISTRATIVE COUNTY OF DURHAM.

TUBERCULOSIS—New Cases and Deaths, 1937-1966.

Year.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
1937	406	334	272	258	268	255	65	68
1938	339	317	302	293	270	200	57	67
1939	410	295	266	254	292	217	67	54
1940	380	291	226	248	290	236	45	37
1941	388	382	241	240	299	243	55	51
1942	367	390	248	244	245	190	68	55
1943	438	398	240	290	296	218	64	26
1944	445	469	235	246	233	190	51	49
1945	527	386	249	265	255	203	48	56
1946	604	447	202	183	231	199	64	47
1947	534	474	166	172	253	263	58	38
1948	595	532	146	149	200	236	58	34
1949	552	515	127	146	240	188	39	35
1950	682	607	113	130	220	136	34	22
1951	654	525	102	110	195	126	26	22
1952	562	476	70	97	138	84	13	13
1953	502	415	66	78	129	92	14	10
1954	449	361	68	65	120	56	11	4
1955	376	331	54	61	108	54	9	13
1956	367	317	54	52	77	28	5	6
1957	368	264	42	65	96	29	7	4
1958	371	224	39	52	74	27	12	3
1959	289	191	32	45	74	20	7	1
1960	300	174	28	37	63	27	3	4
1961	257	161	37	37	57	17	2	1
1962	259	166	25	36	48	7	3	1
1963	222	130	27	31	44	10	4	1
1964	216	106	33	32	49	11	3	1
1965	158	99	19	30	56	12	4	2
1966	201	96	16	19	61	17	4	2

TABLE 16.

ADMINISTRATIVE COUNTY OF DURHAM, 1966.

Numbers of Venereal Diseases patients treated for the first time.

	Treatment Centres.							
	Stockton and Thor'by Hosp.	New-castle General Hosp.	South Shields Clinic.	Royal Infir. Sunder-land.	General Hospital West Hartle-pool.	Memorial Hospital Dar-lington.	General Hospital Middles-brough.	Total.
Syphilis	—	9	1	5	1	—	—	16
Gonorrhoea	21	63	8	36	5	14	18	165
Other Conditions ...	72	378	56	255	12	68	59	900
Totals	93	450	65	296	18	82	77	1081

TABLE 17.

ADMINISTRATIVE COUNTY OF DURHAM, 1966—Deaths from cancer showing the organs affected, sex and age periods.

Based on local tabulations extracted from Monthly Returns submitted by District Registrars.

District.	Deaths at subjoined ages.					Buccal Cavity and Pharynx		Digestive Organs and Peritoneum		Respiratory System		Uterus	Other Female Genital Organs	Breast		Male Genital Organs	Urinary Organs		Skin (Scrotum excepted)		Brain and other parts of the Nervous System		Other or Unspecified Organs		TOTALS	
	0-25	25-45	45-65	65-75	75 & Up	M.	F.	M.	F.	M.	F.			M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
AREA No. 1.																										
Blaydon U.D. ...	—	6	27	21	18	1	—	13	11	20	5	4	2	2	5	1	2	—	—	—	—	—	4	2	43	29
Ryton U.D.	—	—	6	6	5	—	—	5	6	2	—	1	—	—	—	—	—	—	—	1	1	—	—	1	8	9
Whickham U.D. ...	1	3	25	14	17	—	—	14	10	13	1	2	—	—	4	5	2	1	1	—	—	—	3	4	38	22
AREA No. 2.																										
Jarrow M.B.	—	3	22	28	13	1	—	20	7	13	3	2	1	—	8	1	2	—	—	2	—	—	2	4	39	27
Felling U.D. ...	—	6	25	30	17	—	—	16	10	24	4	3	—	1	7	—	—	—	—	1	—	1	3	8	44	34
Hebburn U.D. ...	1	1	27	22	10	—	—	14	10	9	3	4	3	—	6	—	—	3	—	—	3	—	5	1	31	30
AREA No. 3.																										
Consett U.D. ...	2	3	36	22	16	—	—	19	9	17	2	2	2	—	9	5	1	—	—	1	2	—	8	2	52	27
Stanley U.D.	2	9	48	39	18	3	—	28	17	17	2	9	2	2	8	6	3	—	—	—	1	2	10	6	70	46
Lanchester R.D. ...	—	2	13	9	6	1	—	4	5	5	1	3	—	—	6	1	—	—	—	—	1	1	1	1	13	17
AREA No. 4.																										
Chester-le-Street U.D.	—	2	18	16	5	1	—	9	6	7	2	1	1	—	2	—	1	1	—	—	1	1	6	2	25	16
Chester-le-Street R.D.	—	6	27	28	17	—	—	15	13	21	1	4	1	1	7	2	2	1	—	—	1	1	5	3	47	31
AREA No. 5.																										
Boldon U.D. ...	1	5	23	18	15	1	1	9	12	13	2	2	1	—	6	1	2	2	—	—	1	—	5	4	32	30
Hetton U.D. ...	—	2	12	8	8	—	—	8	6	5	—	—	—	—	3	—	2	—	—	1	—	—	3	2	18	12
Houghton-le-Spring U.D.	—	3	18	25	13	1	—	13	10	13	—	2	—	—	4	3	2	1	1	—	1	2	3	3	37	22
Seaham U.D. ...	1	4	27	17	13	1	1	23	7	8	4	1	1	—	8	2	1	—	—	—	1	—	4	—	40	22
Washington U.D. ...	—	7	25	10	9	—	—	10	6	17	—	—	1	—	5	2	2	1	—	—	—	—	3	4	34	17
Sunderland R.D. ...	1	2	12	20	13	3	—	11	9	13	2	1	—	—	—	1	1	2	1	—	—	—	3	1	33	15
AREA No. 6.																										
Crook & Willington U.D.	—	2	24	12	18	—	1	16	8	11	3	1	3	1	4	2	1	—	—	—	—	—	4	1	35	21
Tow Law U.D. ...	—	—	4	1	1	—	—	1	1	—	1	1	—	—	—	—	—	—	—	—	—	—	—	2	1	5
Weardale R.D. ...	—	1	9	4	6	—	—	5	4	3	1	1	—	—	2	—	—	1	—	—	—	—	1	2	9	11
AREA No. 7.																										
Durham M.B. ...	—	2	18	16	18	—	—	11	13	12	1	3	5	—	5	—	1	—	—	—	—	—	2	1	26	28
Brandon & Byshottles U.D.	1	2	23	11	10	1	1	13	6	8	—	—	3	—	5	2	1	1	1	—	1	—	3	1	30	17
Durham R.D. ...	1	2	26	20	25	1	2	11	13	14	4	4	1	—	7	4	2	1	—	1	—	—	5	4	37	37
AREA No. 8.																										
Barnard Castle U.D.	—	—	5	1	5	—	1	—	3	3	—	—	—	—	2	—	1	1	—	—	—	—	—	—	4	7
Barnard Castle R.D.	—	2	12	12	4	—	—	4	7	6	2	1	—	—	3	2	2	—	—	—	—	—	2	1	16	14
AREA No. 9.																										
Bishop Auckland U.D.	2	6	25	24	22	1	1	14	9	18	2	3	7	2	5	3	2	1	—	1	—	—	3	7	43	36
Shildon U.D. ...	—	—	13	8	7	—	—	10	2	11	—	—	—	—	2	—	1	—	—	—	1	—	1	—	24	4
Spennymoor U.D. ...	—	5	13	12	13	—	—	11	7	8	3	1	1	—	4	3	1	—	—	—	—	1	—	3	23	20
AREA No. 10.																										
Hartlepool M.B. ...	—	3	19	10	7	—	2	13	6	14	—	—	1	—	—	1	—	1	—	—	—	—	—	1	28	11
Billingham U.D. ...	1	5	21	19	14	1	1	13	10	16	1	1	3	—	3	3	1	—	—	1	—	1	1	4	35	25
Darlington R.D. ...	—	1	12	7	8	1	—	4	3	5	3	1	3	—	3	—	1	—	—	1	—	—	3	—	14	14
Sedgefield R.D. ...	1	2	45	37	19	—	1	25	20	20	3	—	1	—	4	5	3	1	—	—	2	3	11	5	66	38
Stockton R.D. ...	—	—	5	1	6	1	—	3	3	—	1	—	1	—	2	—	—	—	—	—	—	—	1	—	5	7
Easington R.D. ...	1	14	79	53	26	2	2	33	31	36	8	14	2	—	17	6	4	1	—	—	3	2	6	6	90	83
Stockton M.B. ...	3	9	67	54	41	3	1	39	37	38	3	5	6	1	10	8	4	1	—	—	3	2	7	6	103	71
ADMINISTRATIVE COUNTY	19	120	811	635	463	24	15	457	337	440	68	77	52	10	166	69	48	21	4	10	23	17	118	92	1193	855

TABLE 18.

CERVICAL CYTOLOGY—1966.

	Billingham	Consett	Hebburn	Houghton-le-Spring	Newton Aycliffe	Easington	Stockton	Total
No. of sessions during year	44	40	49	52	16	67	54	322
No. of smears taken ...	1,189	1,300	1,527	1,773	412	1,647	866	8,714
No. of repeat smears ...	4	85	112	36	5	31	3	276
No. of positive cases ...	2	14	19	6	3	7	3	54
No. of smears taken from persons resident outside admin. county... ...	21	23	11	7	5	7	69	143

TABLE 19.

MENTAL HEALTH SERVICE—HOSPITAL ADMISSIONS, 1966.

	Hospital	Section 25 (Observation)	Section 26 (Treatment)	Section 29 (Emergency)	Section 39 (Leave Revoked)	Section 40 (Absence without leave)	Section 60 (Court Orders)	Section 72 (Prison)	Informal	Temporary (Cir. 5/52)
Mentally Ill	Cherry Knowle, Ryhope	12	—	13	1	—	2	—	17	—
	Newcastle General	—	—	1	—	—	—	—	—	—
	South Shields General	3	—	1	—	—	—	—	12	—
	St. Mary's, Stannington	4	1	31	5	3	—	—	118	—
	St. Nicholas, Gosforth	36	4	37	—	—	—	—	127	—
	West Hartlepool General	—	—	9	—	—	—	—	4	—
	Winterton, Sedgefield	46	18	397	2	1	2	—	243	1
	Royal Infirmary, Sunderland	—	—	1	—	—	—	—	—	—
	Clifton Hospital, York	—	—	—	—	—	—	—	1	—
	Totals ...	101	23	490	8	4	4	—	522	1
Mentally Sub-Normal	Aycliffe	—	1	—	—	2	4	—	15	13
	Prudhoe and Monkton	2	—	—	1	—	6	—	18	85
	Heath House, Houghton-le-Spring	—	—	—	—	—	—	—	—	1
	Binchester Whins ...	—	—	—	—	—	—	—	1	—
	Northgate, Morpeth	—	—	—	—	—	1	1	—	—
	Totals	2	1	—	1	2	11	1	34	99

TABLE 20.

Administrative County of Durham, 1966.

Numbers of all cases of infectious and other notifiable diseases originally notified, and of the final numbers according to sex and age after corrections subsequently made either by notifying medical practitioners or medical superintendents of hospitals.

	Scarlet fever		Whooping cough		Acute poliomyelitis				Measles (excluding rubella)		Diphtheria		Dysentery		Meningo-coccal infection	
					Paralytic		Non-paralytic									
Numbers originally notified	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Total (All Ages) ...	172	167	315	343	—	—	1	—	4,135	3,875	—	—	168	161	6	11
Final numbers after correction																
Under 1 year	1	1	37	25	—	—	—	—	211	202	—	—	9	7	2	2
1— „	5	5	40	54	—	—	—	—	542	470	—	—	18	10	1	1
2— „	14	9	55	58	—	—	—	—	601	561	—	—	5	17	—	—
3— „	16	21	52	36	—	—	—	—	646	628	—	—	9	17	—	1
4— „	29	32	47	52	—	—	—	—	630	534	—	—	12	11	—	1
5—9 „	77	72	79	111	—	—	—	—	1,473	1,433	—	—	44	38	1	3
10—14 „	26	25	1	4	—	—	—	—	20	31	—	—	8	5	—	1
15—24 „	4	2	—	—	—	—	—	—	5	7	—	—	7	7	—	—
25 and over	—	—	—	1	—	—	—	—	3	3	—	—	36	36	—	2
Age unknown ...	—	—	2	1	—	—	—	—	4	5	—	—	2	—	—	—
Total (All Ages) ...	172	167	313	342	—	—	—	—	4,135	3,874	—	—	150	148	4	11

	Acute pneumonia		Smallpox		Acute encephalitis				Enteric or Typhoid fever		Paratyphoid fevers		Erysipelas		Food poisoning	
					Infective		Post-infectious									
Numbers originally notified	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Total (All Ages) ...	73	42	—	—	2	2	6	5	2	—	1	—	10	6	28	44
Final numbers after correction																
Under 5 years ...	7	7	—	—	—	—	—	—	—	—	—	—	—	—	4	3
5—14 „	6	4	—	—	2	—	1	2	—	—	—	—	—	—	3	3
15—44 „	21	4	—	—	—	1	1	2	—	—	1	—	5	2	4	12
45—64 „	19	10	—	—	—	—	5	—	1	—	—	—	4	3	2	3
65 and over	19	16	—	—	—	—	—	—	—	—	—	—	1	1	—	—
Age unknown ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Total (All Ages) ...	73	42	—	—	2	1	7	4	1	—	1	—	10	6	14	22

	Tuberculosis						Total of New Cases coming to the Knowledge of Medical Officers of Health otherwise than by Formal Notification.		Other notifiable diseases			
	Respiratory		Meninges & C.N.S.*		Other				Original		Final	
Numbers originally notified	M	F	M	F	M	F	M	F	M	F	M	F
Total (All Ages) ...	201	96	3	1	13	19	1	1	Puerperal pyrexia			
Final numbers after correction									—	61	—	61
Under 5 years ...	6	7	1	—	1	—			Ophthalmia neonatorum			
5—14 years	7	7	—	—	—	1			1	—	1	—
15—44 „	80	59	1	1	4	10			Malaria			
45—64 „	71	16	—	—	5	7			—	—	—	—
65 and over	37	7	1	—	3	—						
Age unknown ...	—	—	—	—	—	—						
Total (All Ages) ...	201	96	3	1	13	18						

* Central nervous system.

TABLE 21.

ADMINISTRATIVE COUNTY OF DURHAM, 1966.—Corrected Number of Infectious Diseases notified in each sanitary district.

Districts.	Est. Population 1966	Scarlet Fever		Whooping Cough		Measles		Acute Poliomyelitis: Paralytic		Acute Poliomyelitis: Non-Paralytic		Tuberculosis: Respiratory		Tuberculosis: Meninges & C.N.S.		Diphtheria		Smallpox		Tuberculosis Other Forms.		Meningococcal Infection		Acute Encephalitis: Infective		Acute Encephalitis: Post-Infectious		Dysentery		Ophthalmia Neonatorum		Puerperal Pyrexia		Pneumonia		Para-Typhoid Fever		Enteric or Typhoid fever		Food Poisoning		Erysipelas		Malaria		Totals.	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
AREA No. 1.																																															
Blaydon U.D.	31,610	15	8	4	8	76	70	—	—	—	—	2	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	14	9	—	—	—	—	2	2	—	—	—	—	—	—	—	—	—	—	113	101
Ryton U.D.	14,460	—	—	—	1	49	55	—	—	—	—	8	4	—	—	—	—	—	—	2	—	—	—	—	—	—	—	5	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	64	73
Whickham U.D.	27,530	18	16	17	15	161	163	—	—	—	—	6	1	—	—	—	—	—	—	2	1	—	1	1	—	—	1	3	3	—	—	—	—	3	1	—	—	—	—	1	2	1	1	—	—	213	205
AREA No. 2.																																															
Jarrow M.B.	26,520	—	—	11	15	138	98	—	—	—	—	8	3	—	—	—	—	—	—	3	2	—	1	—	—	—	—	6	1	—	—	—	1	10	5	—	—	—	—	1	—	—	—	—	—	177	126
Felling U.D.	38,780	5	7	12	12	218	241	—	—	—	—	17	4	2	1	—	—	—	—	—	—	—	—	1	—	1	—	2	3	—	—	—	—	3	2	—	—	1	—	1	1	1	—	—	—	264	271
Hebburn U.D.	25,030	2	2	10	18	123	108	—	—	—	—	7	6	—	—	—	—	—	—	1	—	—	1	—	—	—	—	5	5	—	—	—	—	6	3	—	—	—	—	—	—	—	—	—	—	154	143
AREA No. 3.																																															
Consett U.D.	37,600	12	8	35	35	161	114	—	—	—	—	5	4	—	—	—	—	—	—	1	1	—	2	—	—	4	—	19	26	—	—	—	—	—	1	—	—	—	—	—	2	—	—	—	—	237	193
Stanley U.D.	44,860	26	35	—	1	184	179	—	—	—	—	9	5	1	—	—	—	—	—	1	—	—	1	—	—	—	—	14	9	—	—	—	—	6	3	—	—	—	—	—	1	1	—	—	—	242	234
Lanchester R.D.	14,710	5	3	2	5	56	42	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15	9	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	81	62
AREA No. 4.																																															
Chester-le-Street U.D.	19,980	—	—	2	3	174	170	—	—	—	—	7	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	185	177
Chester-le-Street R.D.	45,090	6	4	8	12	121	124	—	—	—	—	12	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	3	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	151	149
AREA No. 5.																																															
Boldon U.D.	26,120	2	1	5	1	66	63	—	—	—	—	10	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8	4	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	91	77
Hetton U.D.	17,120	—	—	2	1	47	46	—	—	—	—	5	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	54	51
Houghton-le-Spring U.D.	31,190	1	1	1	3	179	199	—	—	—	—	13	4	—	—	—	—	—	—	—	3	—	—	—	—	—	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	196	212
Seaham U.D.	25,330	—	—	—	—	49	56	—	—	—	—	5	5	—	—	—	—	—	—	—	4	—	—	—	—	—	—	6	6	—	—	—	1	1	1	—	—	—	—	—	—	2	—	—	—	63	73
Washington U.D.	19,870	1	3	52	50	174	134	—	—	—	—	4	2	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	233	191
Sunderland R.D.	30,160	1	1	37	34	276	229	—	—	—	—	9	7	—	—	—	—	—	—	—	2	—	—	—	—	—	—	18	12	—	—	—	2	1	—	—	—	—	—	1	6	—	—	—	—	343	293
AREA No. 6.																																															
Crook & Willington U.D.	24,040	3	7	1	—	35	34	—	—	—	—	4	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	44	43
Tow Law U.D.	2,830	1	—	—	—	13	12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5	2	—	—	—	—	—	—	—	—	—	—	19	14
Weardale R.D.	8,170	—	1	—	—	11	12	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	12	13
AREA No. 7.																																															
Durham M.B.	24,210	3	5	1	2	99	114	—	—	—	—	6	1	—	—	—	—	—	—	—	—	2	2	—	—	—	—	2	3	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	114	128
Brandon & Byshottles U.D.	19,190	2	3	1	2	83	66	—	—	—	—	—	1	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	1	3	2	—	—	—	—	—	—	—	—	—	—	91	75
Durham R.D.	37,160	11	14	13	8	218	245	—	—	—	—	4	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	6	2	—	—	—	—	3	2	—	—	—	—	256	272
AREA No. 8.																																															
Barnard Castle U.D.	5,360	1	—	—	—	7	15	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	15
Barnard Castle R.D.	17,110	2	1	6	5	15	18	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	3	—	—	—	1	3	—	—	—	—	—	1	2	1	—	—	—	28	32
AREA No. 9.																																															
Bishop Auckland U.D.	34,780	6	8	20	26	24	37	—	—	—	—	9	2	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	35	12	9	—	—	—	—	4	4	1	—	—	—	76	123
Shildon U.D.	13,890	2	—	9	6	130	111	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	4	—	—	—	—	5	3	—	—	—	—	—	—	1	—	—	—	153	124
Spennymoor U.D.	18,550	3	2	2	3	25	27	—	—	—	—	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	3	1	—	—	—	—	—	—	—	—	—	—	39	35
AREA No. 10.																																															
Hartlepool M.B.	18,110	3	2	1	7	109	109	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	117	124
Billingham U.D.	34,890	7	6	17	17	133	101	—	—	—	—	6	2	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	165	127
Darlington R.D.	27,940	1	—	1	1	29	25	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	34	27
Sedgefield R.D.	35,200	1	1	1	2	60	57	—	—	—	—	3	3	—	—	—	—	—	—	—	—	1	1	—	—	—	—	1	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	67	68
Stockton R.D.	14,270	2	—	4	2	22	21	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	29	24
Easington R.D.	86,100	12	11	17	15	567	507	—	—	—	—	10	5	—	—	—	—	—	—	—	3	—	—	—	—	—	—	2	2	—	—	—	13	3	1	—	—	—	—	—	—	—	1	—	—	611	558
Stockton M.B.	83,260	18	17	21	32	303	272	—	—	—	—	14	10	—	—	—	—	—	—	1	—	—	—	—	1	1	2	15	20	—	—	—	3	—	—	—	—	—	—	—	—	2	3	—	—	375	360
ADMINISTRATIVE COUNTY	981,020	172	167	313	342	4,135	3,874	—	—	—	—	201	96	3	1	—	—	—	—	13	18	4	11	2	1	7	4	150	148	1	—	—	61	73	42	1	—	1	—	14	22	10	6	—	—	5,100	4,793

TABLE 22.

ADMINISTRATIVE COUNTY OF DURHAM, 1966—Notifiable Diseases. Corrected number of Cases and Deaths.

Diseases.	Cases.	Deaths.
Scarlet Fever	339	—
Whooping Cough	655	—
Diphtheria	—	—
Measles	8,009	1
Pneumonia	115	729
Meningococcal Infection	15	3
Acute Poliomyelitis—		
Paralytic	—	—
Non-Paralytic	—	—
Ophthalmia Neonatorum	1	—
Puerperal Pyrexia	61	—
Smallpox	—	—
Para-Typhoid Fever	1	—
Enteric or Typhoid Fever	1	—
Erysipelas	16	—
Malaria	—	—

TABLE 23.

ADMINISTRATIVE COUNTY OF DURHAM—Corrected number of cases of certain Infectious Diseases notified, 1957-1966

	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	Mean of 10 years.
Smallpox	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	945	762	686	400	274	145	241	636	522	339	495
Diphtheria	—	1	—	—	—	—	—	—	—	—	—
Enteric & Para-Typhoid Fevers	11	6	12	5	2	5	4	7	5	2	6
Puerperal Pyrexia	126	97	71	49	101	86	75	80	61	61	81
Erysipelas	74	37	55	40	30	20	22	35	22	16	35
TOTALS	1,156	903	824	494	407	256	342	758	610	418	617
Attack Rate per 1,000 Living ...	1.2	1.0	0.9	0.5	0.4	0.3	0.4	0.8	0.7	0.4	0.6

TABLE 24.

ADMINISTRATIVE COUNTY OF DURHAM—Deaths and Death-rate from the seven principal Infective Diseases, 1957-1966

	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	Mean of 10 years
Estimated Population	928,800	935,800	943,700	950,870	955,050	964,550	969,580	970,190	974,860	981,020	957,442
Smallpox	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever ...	1	—	—	—	—	—	—	—	—	—	—
Measles	2	—	2	—	—	—	—	—	2	1	1
Whooping Cough ...	1	—	1	—	1	—	—	1	1	—	—
Diarrhoea and Enteritis under 2 years ...	11	10	11	9	6	14	10	7	13	16	11
TOTAL DEATHS ...	15	10	14	9	7	14	10	8	16	17	12
Deaths per 1,000 Population	0.02	0.01	0.01	0.009	0.007	0.015	0.010	0.008	0.017	0.017	0.012

TABLE 25.

ADMINISTRATIVE COUNTY OF DURHAM, 1966.

Results of examination of samples of raw, pasteurised and sterilised milk collected by officers of the County Health Department.

		Methylene Blue Test.				*Phosphatase Test*			*Biological Test for Tuberculosis, etc.*					*Turbidity Test*		
	No. of samples taken	Passed	Failed	Inconclusive	% Failed	Passed	Failed	% Failed	No. of samples taken	Negative	Positive	Inconclusive	% Positive	Passed	Failed	% Failed
Pasteurised Milk																
(*a*) Dairies ...	355	343	7	5	1.97	353	2	0.56	—	—	—	—	—	—	—	—
(*b*) Schools	291	280	8	3	2.75	289	2	0.69	—	—	—	—	—	—	—	—
(*c*) Hospitals...	60	55	3	2	5	59	1	1.69	—	—	—	—	—	—	—	—
(*d*) Dealers ...	1,990	1,820	144	26	7.2	1,981	9	0.45	—	—	—	—	—	—	—	—
	2,696	2,498	162	36	6.1	2,682	14	0.52	—	—	—	—	—	—	—	—
Untreated Milk																
(*a*) Farms ...	74	67	7	—	9.45	—	—	—	30	8	—	4	—	—	—	—
(*b*) Dealers ...	687	515	120	52	17.8	—	—	—	440	408	12	38	2.73	—	—	—
	761	582	127	52	16.95	—	—	—	470	416	12	42	2.56	—	—	—
Sterilised Milk ...																
(*a*) Dairies ...	45	—	—	—	—	—	—	—	—	—	—	—	—	45	—	—
(*b*) Dealers ...	976	—	—	—	—	—	—	—	—	—	—	—	—	976	—	—
	1,021	—	—	—	—	—	—	—	—	—	—	—	—	1021	—	—
TOTALS ...	4,478	3,080	289	88	6.45	2,682	14	0.52	470	416	12	42	2.56	1021	—	—

TABLE 26.

HOUSING.

Statement as to the position of Housing in the Administrative County of Durham on the 31st December, 1966 (Figures supplied by District Councils).

Districts.	Houses Erected during 1966 by			Total No. of Inhabited Houses in District.
	Local Authority	Any Other Housing Authority.	Private Persons.	
Area No. 1.				
Blaydon U.D.	92	—	247	10,776
Ryton U.D.	26	—	143	5,235
Whickham U.D.	91	—	177	9,462
Area No. 2.				
Jarrow M.B.	255	—	24	8,599
Felling U.D.	88	—	98	12,453
Hebburn U.D.	95	—	8	8,330
Area No. 3.				
Consett U.D.	82	—	46	12,231
Stanley U.D.	86	—	22	14,755
Lanchester R.D.	—	—	81	4,750
Area No. 4.				
Chester-le-Street U.D.	65	—	184	7,137
Chester-le-Street R.D.	352	—	95	15,231
Area No. 5.				
Boldon U.D.	16	2	99	8,645
Hetton U.D.	77	—	29	5,710
Houghton-le-Spring U.D.	110	—	240	10,705
Seaham U.D.	38	—	1	8,120
Washington U.D.	—	—	107	6,459
Sunderland R.D.	131	—	188	10,098
Area No. 6.				
Crook and Willington U.D.	10	—	9	8,523
Tow Law U.D.	—	—	—	920
Weardale R.D.	67	—	7	3,254
Area No. 7.				
Durham M.B.	69	—	161	6,806
Brandon and Byshottles U.D.	54	—	2	6,422
Durham R.D.	92	—	303	12,301
Area No. 8.				
Barnard Castle U.D.	—	—	8	1,714
Barnard Castle R.D.	20	—	15	5,935
Area No. 9.				
Bishop Auckland U.D.	332	—	61	11,137
Shildon U.D.	56	—	7	4,727
Spennymoor U.D.	24	—	25	6,471
Area No. 10.				
Hartlepool M.B.	86	—	32	5,328
Billingham U.D.	42	—	114	10,700
Darlington R.D.	12	161	180	8,575
Sedgefield R.D.	54	—	99	11,500
Stockton R.D.	12	—	323	4,570
Easington R.D.	205	355	3	28,627
Stockton M.B.	134	—	412	25,465
Total	2,873	518	3,550	321,671

TABLE 27.

CLOSET ACCOMMODATION.

The following table gives the number and type of convenience in each sanitary district of the county at the end of 1966. In addition information is given in the table as to the conversions of ashpit privies and ash-closets into water-closets during the year.

Districts.	Total number in District			Ashpit Privies converted into Water-Closets.	Ash Closets converted into Water-Closets
	Water-Closets	Ash-Closets	Ashpit Privies		
Area No. 1.					
Blaydon U.D.	13,646	7	—	—	24
Ryton U.D.	5,404	—	12	1	—
Whickham U.D.	10,084	—	19	—	—
Area No. 2.					
Jarrow M.B.	11,295	—	—	—	—
Felling U.D.	13,459	3	—	—	—
Hebburn U.D.	9,136	—	—	—	—
Area No. 3.					
Consett U.D.	14,150	25	1	—	—
Stanley U.D.	15,902	38		—	
Lanchester R.D.	4,940	59	29	1	5
Area No. 4.					
Chester-le-Street U.D.	8,265	2	—	—	—
Chester-le-Street R.D.	14,669	20	—	—	—
Area No. 5.					
Boldon U.D.	9,591	14	—	—	—
Hetton U.D.	5,860	—	—	—	—
Houghton-le-Spring U.D.	10,705	—	12	—	—
Seaham U.D.	9,727	—	1	—	—
Washington U.D.	7,592	—	3	—	—
Sunderland R.D.	9,594	—	22	—	—
Area No. 6.					
Crook & Willington U.D.	9,138	293	—	—	5
Tow Law U.D.	820	169	—	—	12
Weardale R.D.	2,817	398	38	21	26
Area No. 7.					
Durham M.B.	8,328	15	5	—	—
Brandon and Byshottles U.D.	6,635	253	5	—	11
Durham R.D.	18,002	139	10	—	—
Area No. 8.					
Barnard Castle U.D.	2,379	3	1	—	—
Barnard Castle R.D.	5,438	696		28	
Area No. 9.					
Bishop Auckland U.D.	12,943	404	40	—	32
Shildon U.D.	5,174	—	59	2	—
Spennymoor U.D.	7,542	90	—	—	66
Area No. 10.					
Hartlepool M.B.	5,327	1	—	—	—
Billingham U.D.	11,618	4	1	—	—
Darlington R.D.	8,188	189		8	
Sedgefield R.D.	13,960	114		1	
Stockton R.D.	4,717	19	—	—	3
Easington R.D.	29,643	97	68	—	—
Stockton M.B.	31,659	—	—	—	—

PART III

STATISTICAL TABLES

B. SCHOOL HEALTH SERVICE

TABLE 28

MINISTRY OF EDUCATION TABLES RELATING TO THE INSPECTION AND TREATMENT OF PUPILS IN THE ADMINISTRATIVE COUNTY AREA EXCLUDING THE EXCEPTED DIVISIONS OF EASINGTON AND STOCKTON-ON-TEES.

Number of Pupils on registers of maintained and assisted nursery, primary, secondary and special schools in January, 1967 138,111

PART I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS).

Periodic Medical Inspections.

Age Groups Inspected (by year of birth).	Number of Pupils Inspected.	Physical Condition of Pupils Inspected.	
		Satisfactory.	Unsatisfactory.
		No.	No.
1962 and later	520	517	3
1961	3,915	3,872	43
1960	6,769	6,713	56
1959	2,397	2,368	29
1958	1,301	1,281	20
1957	741	733	8
1956	1,827	1,812	15
1955	4,530	4,502	28
1954	2,870	2,849	21
1953	751	743	8
1952	1,258	1,249	9
1951 and earlier	5,295	5,259	36
Total	32,174	31,898	276

Other Inspections.

Notes :— A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections 1,274
Number of Re-inspections 7,529
Total 8,803

Infestation with Vermin.

Notes :—All cases of infestation, however slight, are included.

(*a*) Total number of individual examinations of pupils in schools by school nurses or other authorised persons 55,005

(*b*) Total number of individual pupils found to be infested 3,254

(*c*) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2) Education Act, 1944) 3,254

(*d*) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944) ... ... —

PART II.

Defects found by Periodic and Special Medical Inspections during the Year.

Note: (T) Number of pupils found to need treatment.
(O) Number of pupils found to need observation.

Defect or Disease.	Periodic Inspections.								Special Inspections.	
	Entrants.		Leavers.		Others.		Total.			
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin	319	181	163	94	310	120	792	395	35	26
Eyes—										
(*a*) Vision ...	991	716	852	489	1,480	692	3,323	1,897	584	413
(*b*) Squint ...	431	112	37	40	195	86	663	238	66	59
(*c*) Other ...	54	17	25	30	61	18	140	65	16	10
Ears—										
(*a*) Hearing ...	242	318	28	50	112	121	382	489	58	58
(*b*) Otitis Media	134	216	25	47	55	90	214	353	9	22
(*c*) Other ...	44	49	16	16	32	30	92	95	6	7
Nose and Throat ...	388	981	52	129	201	400	641	1,510	41	122
Speech	120	279	9	14	44	55	173	348	32	52
Lymphatic Glands	19	238	—	12	6	74	25	324	2	19
Heart	53	162	28	44	33	90	114	296	16	50
Lungs	189	361	27	60	81	175	297	596	25	58
Developmental—										
(*a*) Hernia ...	49	35	4	1	23	13	76	49	2	5
(*b*) Other ...	57	232	25	27	100	154	182	413	17	34
Orthopaedic—										
(*a*) Posture ...	4	26	3	30	2	30	9	86	1	8
(*b*) Feet ...	65	132	14	101	56	147	135	380	9	19
(*c*) Other ...	68	126	53	54	74	73	195	253	15	33
Nervous System—										
(*a*) Epilepsy ...	33	16	10	2	29	21	72	39	16	9
(*b*) Other ...	48	95	11	8	51	43	110	146	7	15
Psychological—										
(*a*) Development	44	105	8	21	40	112	92	238	42	54
(*b*) Stability ...	16	168	4	14	24	97	44	279	21	44
Abdomen	36	57	10	15	37	29	83	101	16	20
Other	127	106	52	53	108	107	287	266	26	22

PART III.

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Nursery and Special Schools).

Notes :—This part of the return gives the total numbers of :—

(i) cases treated or under treatment during the year by members of the Authority's own staff ;

(ii) cases treated or under treatment during the year in the Authority's school clinics under National Health Service arrangements with the Regional Hospital Board ; and

(iii) cases known to the Authority to have been treated or under treatment elsewhere during the year.

Eye Diseases, Defective Vision and Squint.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	644
Errors of refraction (including squint)	11,529
Total ...	12,173
Number of pupils for whom spectacles were prescribed	10,152

Diseases and Defects of Ear, Nose and Throat.

	Number of cases known to have been dealt with
Received operative treatment :—	
(*a*) for diseases of the ear	28
(*b*) for adenoids and chronic tonsillitis	926
(*c*) for other nose and throat conditions	32
Received other forms of treatment	315
Total ...	1,301
Total number of pupils in schools who are known to have been provided with hearing aids :—	
(*a*) in 1966 (see note (i) below)	18
(*b*) in previous years (see note (ii) below)	114

(i) A pupil recorded under (*a*) above is not recorded at (*b*) in respect of the supply of a hearing aid in a previous year.

(ii) The number entered in (*b*) does not include children who have left school.

Orthopaedic and Postural Defects.

	Number of cases known to have been treated
(*a*) Pupils treated at clinics or out-patients departments	188
(*b*) Pupils treated at school for postural defects	—
Total ...	188

Diseases of the Skin.

(excluding uncleanliness, for which see Table C of Part I).

	Number of cases known to have been treated
Ringworm—(*a*) Scalp	2
(*b*) Body	7
Scabies	21
Impetigo	22
Other skin diseases	712
Total ...	764

Child Guidance Treatment.

	Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics	410

Speech Therapy.

	Number of cases known to have been treated.
Pupils treated by speech therapists	896

Other Treatment given.

	Number of cases known to have been dealt with.
(*a*) Pupils with minor ailments	1,912
(*b*) Pupils who received convalescent treatment under School Health Service arrangements	—
(*c*) Pupils who received B.C.G. vaccination	7,485
(*d*) Other than (*a*) (*b*) and (*c*) above	
Orthoptic	155
U.V.R.	185
Total ...	9,737

PART IV.

Return of Defects found at Medical Inspection, 1966.

Defects of :—	Requiring Treatment.						Requiring Observation.					
	Total Number of Periodic Inspections. 1965—32,318 1966—32,174		Total Number of Special Inspections. 1965— 8,039 1966— 8,803		Total Number of Defects		Total Number of Periodic Inspections. 1965—32,318 1966—32,174		Total Number of Special Inspections. 1965— 8,039 1966— 8,803		Total Number of Defects.	
	Number of Defects		Number of Defects				Number of Defects.		Number of Defects.			
	1966	1965	1966	1965	1966	1965	1966	1965	1966	1965	1966	1965
Skin	792	729	35	38	827	767	395	361	26	22	421	383
Eyes :—												
(*a*) Vision	3,323	3,278	584	555	3,907	3,833	1,897	1,938	413	370	2,310	2,308
(*b*) Squint	663	677	66	83	729	760	238	169	59	54	297	223
(*c*) Other	140	142	16	10	156	152	65	82	10	3	75	85
Ears :—												
(*a*) Hearing	382	357	58	42	440	399	489	389	58	71	547	460
(*b*) Otitis Media ...	214	191	9	8	223	199	353	369	22	22	375	391
(*c*) Other	92	71	6	4	98	75	95	106	7	2	102	108
Nose and Throat	641	684	41	37	682	721	1,510	1,460	122	101	1,632	1,561
Speech	173	217	32	26	205	243	348	320	52	42	400	362
Lymphatic Glands ...	25	42	2	—	27	42	324	433	19	8	343	441
Heart	114	112	16	14	130	126	296	313	50	42	346	355
Lungs	297	368	25	28	322	396	596	648	58	30	654	678
Developmental :—												
(*a*) Hernia	76	64	2	5	78	69	49	46	5	7	54	53
(*b*) Other	182	152	17	10	199	162	413	376	34	26	447	402
Orthopaedic :—												
(*a*) Posture	9	15	1	—	10	15	86	81	8	2	94	83
(*b*) Feet	135	146	9	15	144	161	380	454	19	27	399	481
(*c*) Other	195	145	15	5	210	150	253	259	33	17	286	276
Nervous System :—												
(*a*) Epilepsy ...	72	50	16	9	88	59	39	43	9	8	48	51
(*b*) Other	110	80	7	5	117	85	146	152	15	12	161	164
Psychological :—												
(*a*) Development ...	92	96	42	26	134	122	238	221	54	39	292	260
(*b*) Stability ...	44	60	21	14	65	74	279	258	44	24	323	282
Abdomen	83	93	16	3	99	96	101	128	20	12	121	140
Other Defects or Diseases ...	287	268	26	22	313	290	266	261	22	23	288	284
Totals ...	8,141	8,037	1,062	959	9,203	8,996	8,856	8,867	1,159	964	10,015	9,831

PART V.

Dental Inspection and Treatment carried out by the Authority, 1966

(excluding Easington and Stockton-on-Tees).

(1) *Attendances and Treatment.*

First Visit	17,200
Subsequent Visits	29,355
Additional courses of treatment commenced	1,892
Fillings :—	
Permanent Teeth	28,447
Deciduous Teeth	9,995
Number of Teeth Filled :—	
Permanent Teeth	23,986
Deciduous Teeth	8,610
Extractions :—	
Permanent Teeth	4,867
Deciduous Teeth	17,336
Administration of General Anaesthetics	6,037
Emergencies	879
Other Operations :—	
Number of Pupils X-rayed	578
Prophylaxis	3,980
Teeth otherwise conserved	3,423
Number of Teeth root filled	31
Inlays	—
Crowns	—
Courses of treatment completed	15,646

(2) *Orthodontic Work.*

Cases remaining from previous year	1,132
New Cases commenced during the year	311
Cases completed during year	172
Cases discontinued during year	44
No. of removable appliances fitted	369
No. of fixed appliances fitted	8
Pupils referred to Hospital Consultant	127

(3) *Prosthetic Work.*

Pupils supplied with Full Upper or Full Lower (First time)	5
Pupils supplied with other dentures (First time)	85
Number of Dentures supplied	95

(4) *Anaesthetics.*

General Anaesthetics administered by Dental Officers	239

(5) *Inspections.*

(*a*)	First Inspection at school. Number of Pupils	28,472
(*b*)	First Inspection at clinic. Number of Pupils	3,988
	Number of (*a*) + (*b*) found to require treatment	19,741
	Number of (*a*) + (*b*) offered treatment	19,029
(*c*)	Pupils re-inspected at school clinic	31,269
	Number of (*c*) found to require treatment	20,113

(6) *Sessions.*

Sessions devoted to treatment	10,682.1
Sessions devoted to inspection	565.75
Sessions devoted to Dental Health Education	45

TABLE 29

PERMANENT SCHOOL CLINICS

(Services available 31st December, 1966).

Clinic.		*Sessions.*		*Sessions.*
BILLINGHAM. Queensway.	Medical Officer ...	Tues. (a.m.), Fri.	Oculist	Mon. (noon).
	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).	Speech Therapist	Tues., Thurs.
	Dental Officer ...	Surgery No. 1, Daily. Surgery No. 2, Daily.	Educational Psychologist ...	By arrangement.
			Audiometrician ...	By arrangement.
		Building used by Maternity and Child Welfare and School Health Service.		
BIRTLEY. Hexham Villa.	Medical Officer ...	Tues.	Oculist	Alternate Fridays.
	Minor Ailments ...	Tues. (a.m.)	Educational Psychologist.	By arrangement.
	Dental Officer ...	Daily.	Audiometrician ...	By arrangement.
		Building used by Maternity and Child Welfare and School Health Service.		
BISHOP AUCKLAND. 23, Etherley Lane.	Medical Officer ...	Mon. (a.m.), Thurs.		
	Minor Ailments ...	Mon. (a.m.), Thurs.	Educational Psychologist. ...	By arrangement.
	Dental Officer ...	Daily.		
	Oculist	Tues. (p.m.), Fri. (a.m.)	Audiometrician ...	By arrangement.
		Building used by School Health Service.		
BLAYDON. Shibdon Road.	Medical Officer ...	Tues. (a.m.), Fri. (a.m.)	Oculist	Alt. Wed. (p.m.).
	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).	Educational Psychologist.	By arrangement.
	U.V.R. Lamp ...	Mon. (p.m.), Thurs. (p.m.).	Audiometrician ...	By arrangement.
	Dental Officer ...	Daily.		
		Building used by Maternity and Child Welfare and School Health Service.		
CHESTER-LE-STREET. Mains Farm House, West Lane.	Medical Officer ...	Fri. (a.m.).	Minor Ailments ...	Fri. (a.m.).
		Building used by Maternity and Child Welfare and School Health Service.		
CONSETT. 192 Medomsley Road.	Medical Officer ...	Tues. (a.m.), Fri. (p.m.)	Oculist	Friday (a.m.)
	Minor Ailments ...	Tues. (a.m.), Fri. (p.m.).	Educational Psychologist.	By arrangement.
	Dental Officer ...	Daily.	Audiometrician ...	By arrangement.
		Building used by Maternity and Child Welfare and School Health Service.		
CROOK. Dawson Street.	Medical Officer ...	Wed.	Educational Psychologist.	By arrangement.
	Minor Ailments ...	Wed. (a.m.)	Audiometrician ...	By arrangement.
	U.V.R. Lamp ...	By arrangement.		
	Dental Officer ...	Mon. (a.m.)		
		Building used by School Health Service.		

Clinic.		*Sessions.*		*Sessions.*
DURHAM. Musgrave Gardens.	Medical Officer ...	Mon. (a.m.), Thurs.	Speech Therapist ...	Mon., Tues., Wed., Thurs. (p.m.),
	Minor Ailments ...	Mon. (a.m.), Thurs. (a.m.).	Audiometrician ...	By arrangement.
	U.V.R. Lamp ...	By arrangement.	Oculist	Fri. (p.m)
	Dental Officer ...	No. 1 Surgery—Daily. No. 2 Surgery—Daily.		
	Building used by Maternity and Child Welfare and School Health Service.			
FELLING. Heworth.	Medical Officer ...	Tues. (a.m.) Fri.	Oculist	Thurs. (a.m.).
	Minor Ailments ...	Mon. (a.m.), Tues. (a.m.), Fri. (a.m.).	Educational Psychologist.	By arrangement.
	U.V.R. Lamp ...	Thurs. (p.m.).	Audiometrician ...	By arrangement.
	Dental Officer ...	Daily.		
	Building used by School Health Service.			
HARTLEPOOL. Frederic Street.	Medical Officer ...	Mon. (a.m.)	Oculist	Fri. (a.m.)
	Minor Ailments ...	Mon. (a.m.), Wed. (a.m.).	Educational Psychologist.	By arrangement.
	Dental Officer ...	Mon., Thurs.	Audiometrician ...	By arrangement.
	Building used by Maternity and Child Welfare and School Health Service.			
HEBBURN. Argyle Street.	Medical Officer ...	Mon. (a.m.)	Dental Officer ...	Daily.
	Minor Ailments ...	Mon. (a.m.)	Educational Psychologist.	By arrangement.
	U.V.R. Lamp ...	By arrangement.	Audiometrician ...	By arrangement.
	Building used by Maternity and Child Welfare and School Health Service.			
HOUGHTON-LE-SPRING. Lambton House, Gasworks Lane.	Medical Officer ...	Tues. (a.m.), Fri.	Oculist	Fri. (p.m.).
	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).	Speech Therapist ...	Thurs.
	U.V.R. Lamp ...	Tues. (p.m.).	Audiometrician ...	By arrangement.
	Dental Officer ...	No. 1 Surgery—Daily. No. 2 Surgery—Daily.	Educational Psychologist	By arrangement.
	Building used by Maternity and Child Welfare and by School Health Service.			
JARROW. "Balgownie," Bede Burn Road.	Medical Officer ...	Tues. (a.m.), Fri.	Oculist	1st and 3rd Thurs. (a.m.).
	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).		
	Dental Officer ...	Daily.	Audiometrician ...	By arrangement.
	Building used by School Health Service.			
NEWTON AYCLIFFE. Dalton Way.	Medical Officer ...	Wed. (a.m.).	Oculist	Alt. Fri. (a.m.).
	Minor Ailments ...	Wed. (a.m.), Fri. (a.m.).	Educational Psychologist	By arrangement.
	Dental Officer ...	Daily.	Audiometrician ...	By arrangement.
	Building used by Maternity and Child Welfare and School Health Service.			
RYTON. Grange Road.	Medical Officer ...	Fri. (p.m.)	Minor Ailments Fri. (p.m.)	
	Dental Officer ...	3 days per week.		
	Building used by Maternity and Child Welfare and School Health Service.			

Clinic.		*Sessions.*		*Sessions.*
SEAHAM HARBOUR 1 Princess Road.	Medical Officer ...	Tues. (a.m.).	U.V.R. Lamp ...	By arrangement.
	Minor Ailments ...	Tues. (a.m.).	Dental Officer ...	Daily.
			Speech Therapist	Fri. (p.m.)
	Building used by School Health Service.			
SEAHAM. East View.	Oculist	Thurs. (p.m.).	Audiometrician ...	By arrangement.
	Building used by School Health Service.			
SHILDON. Hallgarth House, Main Street.	Medical Officer ...	Fri.	Educational Psychologist.	By arrangement.
	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).	Audiometrician ...	By arrangement.
	Building used by School Health Service.			
SPENNYMOOR. Cheapside.	Medical Officer ...	Mon. (a.m.), Thurs.	Educational Psychologist.	By arrangement.
	Minor Ailments ...	Mon. (a.m.), Thurs. (a.m.).	Audiometrician ...	By arrangement.
	Building used by Maternity and Child Welfare and School Health Service.			
SPENNYMOOR. Rock Road.	Dental Officer ...	Daily.		
	Building used by School Health Service.			
STANLEY. High Street.	Medical Officer ...	Mon. (a.m.), Tues. (a.m.) Thurs. (a.m.)	Oculist	Alt. Fridays.
	Minor Ailments ...	Mon. (a.m.), Tues. (a.m.). Thurs. (a.m.).	Speech Therapist	Mon., Tues. (p.m.), Wed.
	U.V.R. Lamp ...	By arrangement.	Educational Psychologist.	By arrangement.
	Dental Officer ...	Daily.	Audiometrician ...	By arrangement.
	Building used by School Health Service.			
WASHINGTON Front Street	Medical Officer ...	Mon. (a.m.)	Oculist	Fri. (p.m.)
	Minor Ailments ...	Mon. (a.m.)	Educational Psychologist.	By arrangement.
	Dental Officer ...	Mon. (a.m.), Wed. (a.m.), Thurs, Fri. (a.m.)	Audiometrician ...	By arrangement.
			Speech Therapist	Fri. (a.m.)
	Building used by Maternity and Child Welfare and School Health Service.			

TEMPORARY SCHOOL CLINICS.

(Services available 31st December, 1966).

Clinic.		*Sessions.*		*Sessions.*
BARNARD CASTLE. Methodist Schoolroom.	Medical Officer ...	Wed. (a.m.) 1st and 3rd weeks in month.	Audiometrician ...	By arrangement.
	Minor Ailments ...	Wed. (a.m.) 1st and 3rd weeks in month.		
	Building used by Maternity and Child Welfare and School Health Service.			
BUTTERKNOWLE. County Mixed School.	Minor Ailments ...	Tues. (a.m.).		
	Building used by School Health Service.			
EVENWOOD. C.E. Mixed School.	Minor Ailments ...	Tues. (p.m.).		
	Building used by School Health Service.			
WITTON PARK. County Mixed School.	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).		
	Building used by School Health Service.			

MOBILE DENTAL VANS.

No. 1	Headquarters	...	Wolsingham	Daily
No. 2	„	...	Barnard Castle	Daily
No. 3	„	...	Sedgefield	Daily
No. 4	„	...	Boldon Colliery ...	Daily
No. 5	„	...	Chester-le-Street ...	Daily
No. 6	„	...	Brandon	Daily
No. 7	„	...	Stillington	Daily
No. 8	„	...	Birtley	Daily

CHILD GUIDANCE.

(Services available 31st December, 1966).

Place.		*Sessions.*			*Sessions.*
Bishop Auckland Clinic. 23, Etherley Lane.	Educational Psychologist	By arrangement.	Psychiatrist	...	Wed. (a.m.)
		Building used by School Health Service.			
Durham Child Guidance Clinic. Aykley Heads, Durham.	Educational Psychologist.	Mon.	Psychiatrist	...	Mon.-Thurs. (a.m. only).
		Building used by School Health Service.			
Jarrow Clinic. Balgownie, Bede Burn Road.	Educational Psychologist.	Tues. & Wed. Also by arrangement.	Psychiatrist	...	Wed.
		Building used by School Health Service.			
Seaham Clinic. East View.	Educational Psychologist.	By arrangement.			
		Building used by School Health Service.			

TABLE 30

ANALYSIS OF CASES EXAMINED AT THE SCHOOL CLINICS DURING THE YEAR 1966.

Defect or Disease.	No. of Cases.	No. of Examinations.
1. Cleanliness	6	9
2. Infestation —Head	311	754
—Body	4	15
3. Teeth	10	11
4. Skin— (*a*) Ringworm of Scalp	29	44
(*b*) Ringworm of Body	7	11
(*c*) Other	659	1,453
5. Eyes— (*a*) Vision	355	508
(*b*) Squint	41	49
(*c*) Other	143	263
6. Ears— (*a*) Hearing	1,399	1,868
(*b*) Otitis Media —R	36	76
—L	31	63
(*c*) Other	186	302
7. Nose and Throat	339	540
8. Speech	73	94
9. Lymphatic Glands	14	35
10. Heart and Circulation	62	108
11. Lungs	220	447
12. Development— (*a*) Hernia	2	3
(*b*) Other	37	42
13. Orthopaedic— (*a*) Posture	4	7
(*b*) Feet	105	175
(*c*) Other	79	132
14. Nervous System— (*a*) Epilepsy	15	31
(*b*) Other	203	399
15. Psychological— (*a*) Development	45	69
(*b*) Stability	171	350
16. General Debility	582	1,353
17. Abdomen	63	96
18. Other Defects	677	1,174
19. Special Cases	1	1
20. No appreciable Defect or Disease	144	174
Totals	6,053	10,656

NUMBER OF CASES TREATED AT THE SCHOOL CLINICS DURING THE YEAR, 1966.

Defect or Disease.	No. of Cases.	No. of Attendances.
Ringworm—Scalp	2	3
Ringworm—Body	7	7
Scabies	21	38
Impetigo	22	39
Other skin diseases	712	1,971
Minor Eye Defects (external and other but excluding errors of refraction and squint)	297	577
Refractions	2,981	2,981
Minor Ear Defects	180	369
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains etc.)	1,912	4,957
Nose and Throat Conditions	130	200
Ultra Violet Ray	185	1,801
Totals	6,449	12,943

TABLE 31.

Tuberculin Testing of School Entrants—1966.

Area.	Sanitary Districts.	Number of Schools Visited.	Number of Children Skin Tested.	Positive Reactors.	Negative Reactors.	Number Absent at time of Skin Test.
1	Blaydon U.D. Ryton U.D. Whickham U.D.	19	420	9	411	69
2	Jarrow M.B. Felling U.D. Hebburn U.D.	21	1,200	29	1,171	144
3	Consett U.D. Stanley U.D. Lanchester R.D.	32	872	11	861	157
4	Chester-le-Street U.D. Chester-le-Street R.D.	12	449	10	439	60
5	Boldon U.D. Hetton U.D. Houghton U.D. Seaham U.D. Washington U.D. Sunderland R.D.	27	1,698	16	1,682	186
6	Crook U.D. Tow Law U.D. Weardale R.D.	19	636	7	629	40
7	Durham M.B. Brandon U.D. Durham R.D.	15	459	6	453	52
8	Barnard Castle U.D. Barnard Castle R.D.	13	263	6	257	53
9	Bishop Auckland U.D. Shildon U.D. Spennymoor U.D.	21	628	4	624	86
10	Hartlepool M.B. Billingham U.D. Darlington R.D. Sedgefield R.D. Stockton R.D.	38	1,384	29	1,355	160
	Total	217	8,009	127 ≡ 1.6%	7,882	1,007

TABLE 32.

B.C.G. Vaccination, 1966.

Area.	Sanitary District.	Month(s) Schemes Held in Schools.	Number Skin Tested.	Positive Reactors.		Negative Reactors given B.C.G.	Number absent at time of reading.	Negative reactors not vaccinated for medical reasons.
				Number	%			
1	Blaydon U.D. ...	October/November	468	31	6.6	405	29	3
	Ryton U.D.	November ...	128	13	10.2	108	6	1
	Whickham U.D. ...	October	225	18	8.0	192	12	3
2	Jarrow M.B.	October	485	68	14.0	406	11	—
	Felling U.D.	November... ...	486	80	16.5	375	31	—
	Hebburn	October/November	407	81	19.9	316	10	—
3	Consett U.D.	October	390	18	4.6	340	29	3
	Stanley U.D.	November... ...	560	11	2.0	492	43	14
	Lanchester R.D. ...	Nov./Dec. ...	176	12	6.8	149	11	4
4	Chester-le-Street U.D.	October	253	43	17.0	189	12	9
	Chester-le-Street R.D.	October/November	458	99	21.6	322	24	13
5	Boldon U.D.	November... ...	170	9	5.3	150	10	1
	Hetton U.D.	November... ...	128	7	5.5	113	8	—
	Houghton U.D. ...	Oct/Nov.	335	24	7.2	305	6	—
	Seaham U.D.	November... ...	376	35	9.3	320	21	—
	Washington U.D. ...	November... ...	309	18	5.8	278	13	—
	Sunderland R.D. ...	November... ...	290	35	12.1	234	18	3
6	Crook U.D.	November... ...	181	39	21.5	128	14	—
	Tow Law U.D. ...	—	—	—	—	—	—	—
	Weardale R.D. ...	November... ...	121	32	26.4	79	10	—
7	Durham M.B.	Nov/Dec.	359	75	20.9	270	13	1
	Brandon U.D.	November... ...	195	29	14.9	153	13	—
	Durham R.D. ...	Nov./Dec. ...	277	58	20.9	196	21	2
8	Barnard Castle U.D.	Oct./Nov. ...	169	41	24.3	113	6	9
	Barnard Castle R.D. ...	March	79	21	26.6	45	9	4
9	Bishop Auckland U.D.	January-May/ December ...	532	30	5.7	445	49	8
	Shildon U.D.	June/July ...	136	9	6.6	114	11	2
	Spennymoor U.D. ...	May/June/July ...	276	18	6.5	231	22	5
10	Hartlepool M.B. ...	July/October ...	316	96	30.4	185	13	22
	Billingham U.D. ...	Oct./Nov. ...	528	97	18.4	392	24	15
	Darlington R.D. ...	March/May/Dec.	319	102	32.0	183	19	15
	Sedgefield R.D. ...	May/June ...	404	139	34.4	221	18	26
	Stockton R.D.	May	72	30	41.7	36	2	4
		Total	9,608	1,418	14.8	7,485	538	167

TABLE 33.

Handicapped Pupils—Details of Classification and Placement, 1966.

(*a*) *Blind Pupils.*	
No. of children examined by Consultant Ophthalmologists during the year	1
No. of children examined by School Medical Officers during the year	1
School Medical Officers' recommendations :—	
(*a*) Special schools for blind pupils	1
(*b*) Education otherwise than at school	—
No. in special schools at end of year	27
No. receiving education otherwise than at school	—
No. requiring places in special schools	—
(*b*) *Partially Sighted Pupils.*	
No. of children examined by Consultant Ophthalmologists during year...	6
No. of children examined by School Medical Officers during year	8
School Medical Officers' recommendations :—	
(*a*) Ordinary schools	2
(*b*) Special Schools for partially sighted	6
(*c*) Education otherwise than at school	—
(*d*) Re-examination	—
No. in special schools at end of year	22
No. receiving education otherwise than at school	—
No. requiring places in special schools	4
(*c*) *Deaf.*	
No. of children examined during the year	5
School Medical Officers' recommendations :—	
(*a*) Special Schools for Deaf Children	5
(*b*) Home Tuition	—
No. in special schools at end of year	51
No. receiving education otherwise than at school	—
No. requiring places in special schools	—
(*d*) *Partially Hearing.*	
No. of children examined by School Medical Officers during the year	8
School Medical Officers' recommendations :—	
(*a*) Ordinary schools	—
(*b*) Units for Partially Hearing Children	8
(*c*) Special Schools for Partially Hearing Pupils	—
(*d*) Special schools for other categories	—
No. in special schools at end of year	4
No. receiving education otherwise than at school	—
No. requiring places in special schools	1
No. in units for partially hearing	57
No. awaiting places in units	1

(*e*) *Physically Handicapped.*

No. of children examined during the year	47
No. of children re-examined during the year	195
School Medical Officers' recommendations :—	
(*a*) Ordinary schools	142
(*b*) Special Schools for physically handicapped children	6
(*c*) Special schools for other categories	4
(*d*) Hospital Special Schools	1
(*e*) Education otherwise than at school	88
(*f*) Unsuitable for any school	1
(*g*) Re-examination	—
No. in special schools at end of year	52
No. receiving education otherwise than at school	108
No. requiring places in special schools	—

(*f*) *Delicate.*

No. of children examined during the year	29
No. of children re-examined during the year	29
School Medical Officers' recommendations :—	
(*a*) Ordinary schools	21
(*b*) Special Schools for Delicate Children	25
(*c*) Education otherwise than at school	12
(*d*) Re-examination	—
(*e*) Special schools for other categories	—
No. in special schools at end of year	71
No. receiving education otherwise than at school	9
No. requiring places in special schools	12

(*g*) *Epileptic.*

No. of children examined during the year	4
No. of children re-examined during the year	2
School Medical Officers' recommendations :—	
(*a*) Ordinary school	2
(*b*) Special school for epileptics	3
(*c*) Special school for other categories	—
(*d*) Re-examination	—
(*e*) Home tuition	1
No. in special schools at end of year	8
No. receiving education otherwise than at school	1
No. requiring places in special schools	2

(*h*) Educationally Sub-normal Children.

No. of children examined during the year	284

TABLE 34.

(*a*) Analysis of Cases under Home Supervision of Health Visitors during the year 1966.

Code No.	Defect.	Total Conditions under supervision.	Total No. of visits re conditions.	Total satisfactorily improved.
1.	Cleanliness	280	960	153
2.	Infestation —Head other than at head Inspections	150	334	109
	—Body	12	32	12
3.	Teeth	25	30	22
4.	Skin	450	980	420
5.	Eyes (*a*) Vision	190	220	—
	(*b*) Squint	522	980	40
	(*c*) Other	22	51	22
6.	Ears (*a*) Hearing	410	601	—
	(*b*) Otitis Media —R	32	58	28
	—L	18	40	12
	(*c*) Other	12	16	8
7.	Nose or Throat	410	450	400
8.	Speech	321	530	—
9.	Lymphatic glands	—	—	—
10.	Heart and circulation	51	61	8
11.	Lungs...	15	21	9
12.	Development—(*a*) Hernia	12	14	12
	(*b*) Other	—	—	—
13.	Orthopaedic— (*a*) Posture...	10	15	—
	(*b*) Flat foot	5	8	—
	(*c*) Other	10	16	—
14.	Nervous system—(*a*) Epilepsy	42	82	—
	(*b*) Other	—	—	—
15.	Psychological—(*a*) Development	401	212	—
	(*b*) Stability	510	550	—
16.	Clothing	118	130	70
17.	General condition	201	240	72
18.	Care and after care	2,460	4,227	2,000
Other visits regarding Immunisation and Vaccination			2,331	
Infections		125	160	120
	Totals	6,814	13,349	3,517

(*b*) Cleanliness Survey.

Inspection.	No. of children inspected.	No. of children still unclean.
1st re-inspection (unclean children)	3,227	2,474
2nd „ „ „	3,018	2,049
3rd „ „ „	2,317	1,546
4th „ „ „	1,896	1,319
5th „ „ „	1,466	1,014
6th „ „ „	959	659

The following table compares these figures with the figures of the previous eight years :—

Year.	Percentage clean.	Percentage unclean.	Percentage Verminous of unclean.
1958	91.5	8.5	3.7
1959	91.6	8.4	4.6
1960	92.0	8.0	4.4
1961	92.0	8.0	4.2
1962	92.8	7.2	3.3
1963	92.6	7.4	3.1
1964	93.1	6.9	3.9
1965	92.9	7.1	2.7
1966	94.1	5.9	2.7

The percentage of clean scholars was the highest ever, whilst the percentage of the unclean who were verminous remained at the previous year's low figure of 2.7

In 104 schools, all the children were found to be clean.

9,656 visits were paid to the homes of the children who were found to be unclean.

TABLE 35

School Meals Service—New Kitchen Dining Rooms, 1966

During the year 1966, new Kitchen Dining Rooms have been opened at the following schools:—

Shiney Row Modern.
Washington Village County Junior Mixed.
Edmondsley County Junior Mixed and Infants'.
Ouston County Infants'.
Sacriston Modern.
Greenside County Junior Mixed and Infants'.
Westwood R.C. Junior Mixed and Infants'.
Annfield Plain Grammar Technical.
Annfield Plain Modern.
Leadgate English Martyr's R.C. Modern.
Peases West County Junior Mixed and Infants'.
Stanhope Barrington C.E. Junior Mixed and Infants'.
East Howle County Junior Mixed and Infants'.
Bishop Auckland Woodhouse Close County Junior Mixed.
Ingleton C.E. Junior Mixed and Infants'.
Newton Aycliffe Woodham Burn County Junior Mixed.
Newton Aycliffe Woodham Burn County Infants'.
Shildon Modern.
Belmont C.E. Junior Mixed.
Durham Day.
Durham St. Hild's C.E. Junior Mixed and Infants'.
Billingham Bewley County Junior Mixed.
Bishopton Redmarshall C.E. Junior Mixed and Infants'.
Long Newton/Sadberge C.E. Junior Mixed and Infants'.
Preston-on-Tees County Junior Mixed and Infants'.
Stillington County Junior Mixed and Infants'.
Felling Wardley County Infants'.
Hebburn Park View County Junior Mixed and Infants'.
Hebburn St. Oswald's C.E. Junior Mixed and Infants'.
Jarrow St. Mary's R.C. Infants'.

PART IV

RURAL DISTRICT COUNCIL OF EASINGTON EDUCATION COMMITTEE

(Excepted District).

ANNUAL REPORT of the DISTRICT PRINCIPAL SCHOOL MEDICAL OFFICER

J. W. A. Rodgers, M.B., B.Ch., D.P.H.

for the YEAR 1966.

STAFF OF THE SCHOOL HEALTH SERVICE.

District Principal School Medical Officer.

J. W. A. Rodgers, M.B., B.Ch., D.P.H.

School Medical Officers.

G. L. Anderson, M.B., B.S.
M. Anderson (Mrs.), M.B., B.S. (four-fifths).
M. M. Copland (Mrs.), M.A., M.B., Ch.B., D.P.H. (one-fifth).

School Dental Officers.

G. Haust, L.D.S.
E. I. S. Makepeace (Mrs.), L.D.S.
D. A. Sandison (Mrs.), L.D.S. (resigned 23.12.66).

Consultant Ophthalmologists. (Part-time)

Jacob Frankenthal, L.R.C.P., L.R.C.S., D.O.
Claud J. Sharp, M.B., Ch.B., D.O.

The number of children in schools at January, 1967, was 15,158, divided as follows :—

	Number.	*Children on Roll.*
Nursery...	1	40
Primary	43	10,035
Secondary Modern	13	3,811
Grammar	2	1,151
Special (Day School for Educationally Sub-normal)	1	121
	60	15,158

MEDICAL INSPECTIONS.

Routine inspections are carried out in three groups :—

Entrants
Ten plus
Last year of compulsory education.

Visits are also paid to Easington Junior Training Centre, Horden Day Special School and Wingate Nursery School.

The issue of Forms 10bM, the supplementary record to be held in schools, was extended to include Junior as well as Infant Schools.

The number of children inspected was 2,964 of which 114 were 'specials'.

597 re-inspections were also carried out.

This is a reduction of approximately one quarter as compared to 1965 and was mainly due to staff illness.

The percentage of children whose physical condition was found to be unsatisfactory was 1.05%.

Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected. (by year of birth).	For defective vision (excluding squint).	For any of the other conditions recorded in Part II.	Total Individual Pupils.
1962 and later	—	2	2
1961	16	62	70
1960	43	92	120
1959	10	20	27
1958	7	8	13
1957	9	27	31
1956	23	31	47
1955	110	86	176
1954	69	73	126
1953	10	14	21
1952	52	43	86
1951 and earlier	49	47	85
Total	398	505	804

Defects found at Medical Inspection during the Year.

Defect or Disease.	Periodic Inspections.							
	Entrants.		Leavers.		Others.		Total.	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin	16	18	24	6	26	19	66	43
Eyes—								
(*a*) Vision	70	49	105	14	223	73	398	136
(*b*) Squint	46	5	6	1	42	5	94	11
(*c*) Other	2	—	2	1	17	2	21	3
Ears—								
(*a*) Hearing	13	19	4	6	16	22	33	47
(*b*) Otitis Media ...	1	20	4	12	6	16	11	48
(*c*) Other	1	2	—	1	4	4	5	7
Nose and Throat	47	105	13	22	39	103	99	230
Speech	10	18	—	1	3	6	13	25
Lymphatic Glands ...	1	49	—	2	—	38	1	89
Heart	5	20	3	7	6	25	14	52
Lungs	13	31	5	11	13	21	31	63
Developmental—								
(*a*) Hernia	2	4	1	1	1	1	4	6
(*b*) Other	2	14	—	1	6	10	8	25
Orthopaedic—								
(*a*) Posture	—	—	1	—	1	1	2	1
(*b*) Feet	11	6	4	4	6	15	21	25
(*c*) Other	6	4	9	6	13	11	28	21
Nervous System—								
(*a*) Epilepsy	6	4	5	—	3	2	14	6
(*b*) Other	3	10	3	1	9	12	15	23
Psychological—								
(*a*) Development ...	3	7	2	3	9	12	14	22
(*b*) Stability	2	6	3	—	5	3	10	9
Abdomen	4	4	2	2	9	28	15	34
Other	3	11	17	—	28	21	48	32

(T) Number of pupils found to need treatment.

(O) Number of pupils found to need observation.

Special Inspections.

Defect or Disease.	SPECIAL INSPECTIONS. Pupils requiring Treatment.	Pupils requiring Observation.
Skin	4	3
Eyes—		
(*a*) Vision	25	8
(*b*) Squint	10	1
(*c*) Other	—	1
Ears—		
(*a*) Hearing	6	6
(*b*) Otitis Media	2	2
(*c*) Other	1	—
Nose and Throat	8	10
Speech	3	10
Lymphatic Glands	—	6
Heart	3	3
Lungs	3	8
Developmental—		
(*a*) Hernia	—	1
(*b*) Other	1	—
Orthopaedic—		
(*a*) Posture	—	—
(*b*) Feet	—	3
(*c*) Other	7	1
Nervous System—		
(*a*) Epilepsy	9	—
(*b*) Other	2	1
Psychological—		
(*a*) Development	20	4
(*b*) Stability	2	4
Abdomen	1	3
Other	5	1

Permanent School Clinics

Clinic.	*Sessions.*		*Sessions.*	
Horden. Blackhills Road.	Medical Officer ...	Tuesday (a.m.).	Educational Psychologist.	By arrangement.
	Minor Ailments ...	Tuesday (a.m.).		
	Building used by School Health Service only.			
Murton. Woods Terrace.	Medical Officer ...	Thursday (a.m.).	Educational Psychologist.	By arrangement.
	Minor Ailments ...	Thursday (a.m.).	Audiometrician ...	By arrangement.
	Dental Officer ...	Tues. & Wed.		
	Building used by Maternity and Child Welfare and School Health Service.			
Peterlee. Fleming Place.	Medical Officer ...	Friday.	Speech Therapist	Monday, Thursday, Friday.
	Minor Ailments ...	Friday (a.m.).	Educational Psychologist.	By arrangement.
	Dental Officer ...	No. 1 Surgery—Daily. No. 2 Surgery—Daily.	Audiometrician ...	By arrangement.
			Ophthalmologist ...	Friday (a.m.).
	Building used by Maternity and Child Welfare and School Health Service.			
Wheatley Hill. School House, Front Street.	Medical Officer ...	Alt. Thursdays (p.m.).	Educational Psychologist.	By arrangement.
	Minor Ailments ...	Alt. Thursdays (p.m.).		
	Building used by Maternity and Child Welfare and School Health Service.			
Wingate 'Oaklea', Fir Tree.	Medical Officer ...	Alt. Monday (a.m.)	Speech Therapist	Wednesday.
	Minor Ailments ...	Alt. Mon. (a.m.)	Educational Psychologist.	By arrangement.
	Dental Officer ...	Monday, Thursday and Friday.	Audiometrician ...	By arrangement.
	Ophthalmologist	Wednesday (a.m.)		
	Building used by Maternity and Child Welfare and School Health Service.			

ANALYSIS OF CASES EXAMINED AT THE SCHOOL CLINICS DURING THE YEAR, 1966.

Defect or Disease.	No. of Cases.	No. of Examinations.
1. Cleanliness	—	—
2. Infestation—		
Head	9	39
Body	—	—
3. Teeth	9	9
4. Skin—		
(*a*) Ringworm of Scalp	—	—
(*b*) Ringworm of Body	—	—
(*c*) Other	21	28
5. Eyes—		
(*a*) Vision	30	35
(*b*) Squint	4	4
(*c*) Other	9	12
6. Ears—		
(*a*) Hearing	23	34
(*b*) Otitis Media —R	3	4
—L	1	1
(*c*) Other	3	7
7. Nose or Throat	26	61
8. Speech	3	4
9. Lymphatic Glands	2	3
10. Heart and Circulation	5	8
11. Lungs	15	30
12. Development—		
(*a*) Hernia	—	—
(*b*) Other	1	2
13. Orthopaedic—		
(*a*) Posture	—	—
(*b*) Feet	3	4
(*c*) Other	9	13
14. Nervous System—		
(*a*) Epilepsy	3	7
(*b*) Other	5	13
15. Psychological—		
(*a*) Development	8	12
(*b*) Stability	27	70
16. Abdomen	13	31
17. General Debility	38	89
18. Others	56	87
19. No appreciable Defect or Disease	2	2
Totals	328	609

A full day clinic is held once a quarter in conjunction with Mr. L. C. Smith, Organiser for Deaf Education, when children who wear hearing aids are reviewed. The older of the pre-school children, referred by the Chief Nursing Officer as having possible hearing defects, are also seen at this clinic.

Vision Testing.

A weekly session is held by Mr. J. Frankenthal at Peterlee and Mr. Claud Sharp at Wingate. Where necessary cases are referred to Sunderland Eye Infirmary for orthoptic treatment. 621 children were tested at the clinics during the year.

Head Teachers are informed as to whether or not glasses are prescribed for the children.

Audiometric Testing.

(*a*) In Clinics:—

372 full audiometric tests were performed.
41 of these were on children referred for educational subnormality.
65 children were referred for treatment.
160 had some hearing loss and were listed for review.
147 required no further action.
2 were recommended for a partially hearing unit.
In addition 14 pre-school children attended for audiometric testing.

(*b*) Sweep Testing in Schools:—

This was resumed in June when the allocation of audiometrician's time was increased from 2 to 8 days.

Number of Infant Schools visited	7
Number of pupils tested	1,421
Number referred to clinic for further audiometry	182
	i.e. 12.8%

Child Guidance.

15 children were referred to the Durham Child Guidance Centre.
1 of these was recommended for an approved school, and
5 for placement in a School for Maladjusted children.

As from 23rd November, 1966, a Child Guidance Session has been held weekly at Peterlee Health Centre by Dr. E. Bruce. It is hoped that, now that they are not being asked to travel so far, there will be increased co-operation from parents; particularly in those cases where the original referral was at the request of the school.

Speech Therapy.

Owing to the resignation of the Speech Therapist the appended table refers only to January to April inclusive.

	Boys.	*Girls.*	*Total.*
No. of children on register in January, 1966	71	23	94
No. of new cases admitted for treatment	12	4	16
No. of cases discharged	31	16	47
No. of cases transferred	1	—	1
Types of Speech Defect Treated:			
Stammer	7	—	7
Dyslalia	23	15	38
Cleft Palate	—	1	1
Others	1	—	1
No. of children having received treatment throughout the year	31	16	47

Although the post has been advertised on several occasions there have been no applicants.

The lack of this service is a great educational drawback, in particular to the stammerers and the infants with poor speech development.

Other Examinations.

Physically and mentally handicapped children are ascertained either at the clinics or, where necessary, at home.

The following figures show the distribution of handicapped children in the various categories.

Blind	4	(—)
Partially sighted	8	(3)
Deaf	6	(—)
Partially hearing	4	(1)
Physically handicapped	26	(18)
Delicate...	19	(5)
Epileptic	1	(1)
Educationally sub-normal	149	(46)

The figures in brackets show the number of children examined or re-examined during the year.

39 children are placed in Special Schools (apart from schools for the Educationally Sub-normal).

4 children attend partially hearing units.

86 children are attending special schools for E.S.N. children.

12 children have received Home Tuition during the year either on a permanent or short term basis.

13 children were provided with special transport for medical reasons.

10 children with hearing aids are attending ordinary schools.

At the end of the year 1 child was awaiting admission to a School for the Physically Handicapped and 2 children were waiting to be admitted to Schools for the Maladjusted.

Other examinations carried out at school clinics were as follows :—

For part-time employment while still attending school	4
College Entrants and Intending Teachers	135
Superannuation and Sick Pay cases	73

Vaccination and Immunisation.

Heaf testing of school entrants and testing and B.C.G. vaccination of children in Secondary Modern Schools has been carried out by the Medical Officer of Health and his Staff.

School Medical Officers gave 497 booster doses of diphtheria and/or tetanus vaccine to children who had been given a primary course in Infants' schools in 1965.

In a further offer of immunisation to school entrants 703 booster doses and 536 primary immunisations of diphtheria and/or tetanus were given, also 154 full courses of poliomyelitis vaccine and 234 poliomyelitis boosters.

Dental Services.

The service was fully staffed with three full-time Dental Officers and three Dental Surgery Assistants up to the resignation of a Dental Officer on 23rd December, 1966.

Throughout the year there were two full-time surgeries working at Peterlee. The surgery at Wingate was worked full-time up to the end of August. With the opening of a dental surgery at Murton in September, on two days a week, the Wingate surgery was reduced to three days a week.

Attendances and Treatment.

	Ages 5 *to* 9.	*Ages* 10 *to* 14.	*Ages* 15 *and over.*	*Total.*
First Visit	1,572	1,452	258	3,282
Subsequent visits	819	1,610	294	2,723
Total visits	2,391	3,062	552	6,005
Additional courses of treatment commenced ...	65	98	26	189
Fillings in permanent teeth	1,246	3,400	804	5,450
Fillings in deciduous teeth	908	35	—	943
Permanent teeth filled...	950	2,752	707	4,409
Deciduous teeth filled	859	34	—	893
Permanent teeth extracted	81	397	83	561
Deciduous teeth extracted	2,095	620	—	2,715
General anaesthetics	740	427	52	1,219
Emergencies	29	26	5	60

Number of Pupils x-rayed	86
Prophylaxis	265
Teeth otherwise conserved	1,186
Number of teeth root filled	4
Inlays	2
Crowns	3
Courses of treatment completed	2,696

Orthodontics.

Cases remaining from previous year	61
New cases commenced during year	117
Cases completed during year...	51
Cases discontinued during year	20
No. of removable appliances fitted	141
No. of fixed appliances fitted	—
Pupils referred to Hospital Consultant	27

Prosthetics.

	5 *to* 9.	10 *to* 14.	15 *and over.*	*Total.*
Pupils supplied with F.U. or F.L. (first time)	—	—	—	—
Pupils supplied with other dentures (first time)	—	17	9	26
Number of dentures supplied	—	21	12	33

Anaesthetics.

General Anaesthetics administered by Dental Officers	—

Inspections.

(*a*) First inspection at school. Number of Pupils	3,412
(*b*) First inspection at clinic. Number of Pupils	501
Number of (*a*) + (*b*) found to require treatment	1,841
Number of (*a*) + (*b*) offered treatment	1,838
(*c*) Pupils re-inspected at school or clinic	7,252
Number of (*c*) found to require treatment	3,707

Sessions.

Sessions devoted to treatment	1,294
Sessions devoted to inspection	84
Sessions devoted to Dental Health Education	—

NURSING AND HEALTH VISITOR SERVICES.

Cleanliness Inspections in Schools.

The school nurses carried out the majority of the cleanliness inspections with some help from the health visitors.

537 visits were paid to schools the details being as follows:—

	No. Inspected.	No. Unclean.	No. Verminous.
1st Inspection	8,929	58	6
1st Re-Inspection	1,178	24	—
2nd Re-Inspection	905	12	—
3rd Re-Inspection	1,018	14	1
4th Re-Inspection	801	8	2
5th Re-Inspection	871	9	3
6th Re-Inspection	838	16	2
7th Re-Inspection	807	9	3
8th Re-Inspection	297	7	1
9th Re-Inspection	371	3	—
10th Re-Inspection	18	2	—

Following these inspections, 1,542 visits were paid to the children's homes.

The number of children found to be unclean has continued to decline as compared to previous years.

PART V

BOROUGH OF STOCKTON-ON-TEES
EDUCATION COMMITTEE

(Excepted Division).

ANNUAL REPORT of the
BOROUGH SCHOOL MEDICAL OFFICER

H. J. Peters, M.B., B.S., B.Hy., D.P.H., D.P.A.

for the YEAR 1966.

Details associated with Education in the Borough.

Number of schools 39

These include 25 Primary schools, 9 Secondary Modern Schools, one secondary technical school, two secondary grammar schools, one special open air school for delicate and physically handicapped pupils, one special school (day) for educationally subnormal children. There are also two Nursery Classes for pre-school children.

Number of children on roll 16,251

The Staff of the School Health Service

Borough School Medical Officer—Henry J. Peters, M.B., B.S., B.Hy., D.P.H., D.P.A.

School Medical Officers

Dr. W. R. McKenzie, L.R.C.P.S.E., L.R.F.P.S.G., D.P.H., D.C.H.
Dr. M. O'Gorman, L.R.C.P.S.I., L.M.

School Dental Officers.

F. R. Cadigan, L.D.S., L.R.C.P.S.E., L.R.F.P.S.G.
Mrs. E. N. Rideal, L.D.S. (part-time).
Mrs. M. Anderson, B.D.S. (part-time).

Consultant Ophthalmic Surgeons (part-time).

R. Cowley, F.R.C.S.E., D.O.
W. M. Higginbottom, L.R.C.P.S.E., L.R.F.P.S.G., D.O.

Psychiatrist (part-time).

J. R. Hawkings, M.B., D.P.M.

Medical Inspection

The number of children inspected was 3,863, this total being made up of 1,702 entrants, 943 leavers and 1,218 other inspections.

1,754 children referred by teachers, parents, school nurses or educational welfare officers were examined as "specials".

1,739 re-inspections of children from one or more defects were carried out during the year.

Pupils found to require treatment.

The number of individual pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin) is given below.

Age Groups Inspected. (by year of birth).	For Defective Vision. (excluding squint).	For any other conditions.	Total Individual pupils.
1962 and later	—	—	—
1961...	29	16	45
1960...	21	9	30
1959...	1	1	2
1958...	—	—	—
1957...	—	—	—
1956...	1	—	1
1955...	7	1	8
1954...	59	15	74
1953...	17	2	19
1952...	3	1	4
1951 and earlier	56	6	62
Total	194	51	245

The following table shows the number of defects noted at periodic and special medical inspections as requiring treatment or needing to be kept under observation.

Defect or Disease.	Periodic Inspections. No. of defects. Requiring treatment.	Periodic Inspections. No. of defects. Requiring to be kept under observation.	Special Inspections. No. of defects. Requiring treatment.	Special Inspections. No. of defects. Requiring to be kept under observation.
Skin	—	38	—	1
Eyes—				
a. Vision	194	513	4	145
b. Squint	6	20	1	—
c. Other	1	20	—	—
Ears—				
a. Hearing	23	32	—	1
b. Otitis Media	3	4	—	1
c. Other	5	114	—	1
Nose and Throat	7	34	—	2
Speech	2	29	—	—
Lymphatic Glands	—	2	—	—
Heart	—	14	—	10
Lungs	1	57	—	3
Developmental—				
a. Hernia	—	2	—	1
b. Other	2	69	—	3
Orthopaedic—				
a. Posture	—	5	—	—
b. Feet	—	141	—	4
c. Other	—	14	—	—
Nervous System—				
a. Epilepsy	—	6	—	—
b. Other	1	15	—	1
Psychological—				
a. Developmental	—	1	—	—
b. Stability	—	2	—	—
Abdomen	—	2	—	—
Other	—	1	—	2

Physical Condition.

The whole of the 3,863 children inspected during the year were considered to be in satisfactory physical condition.

ARRANGEMENTS FOR TREATMENT

Minor Ailments.

Arrangements for treatment of minor ailments by the School Nurses are as follows. Places and times of clinics are as set out below, the children attending the clinics in or nearest to their own school: —

Address of Clinic.	*School Nurse in attendance on* :—
106, Yarm Lane	Monday, Wednesday, Friday and Saturday mornings.
Hardwick Infants School	Tuesday and Thursday afternoons.

Address of Clinic.	*School Nurse in attendance on:—*
78, Norton Road	Monday and Friday afternoons.
Frederick Nattrass School	Monday and Wednesday mornings.
Newham Grange School	Tuesday and Friday afternoons.
Tilery Road School	Tuesday mornings and Thursday afternoons.
Ragworth Primary School	Tuesday and Friday afternoons.
Primrose Hill Day School	Tuesday and Thursday mornings.
Fairfield Secondary Modern	Monday and Friday mornings.
Ragworth Open Air School	Daily.

The total number of attendances at the minor ailment clinics during the year was 13,759.

The following table shows the number of defects treated during the year at the School Clinics and elsewhere :—

Defect.	*Number of cases known to have been treated during the year at School Clinics and elsewhere.*
SKIN—	
Ringworm (1) Scalp	1
(2) Body	3
Scabies	125
Impetigo	59
Other skin diseases	8
EYE DISEASES :—	
External and other, but excluding errors of refraction and squint ...	153
EAR DEFECTS	102
MISCELLANEOUS :—	
(e.g. minor injuries, bruises, sores, chilblains, etc.)	4,285

VISUAL DEFECTS AND EXTERNAL EYE DISEASES

A total of 88 sessions were conducted during the year ended 31st December, 1966, at the Ophthalmic Clinic, 78, Norton Road, by the Ophthalmic Surgeons Mr. R. Cowley and Mr. W. M. Higginbottom.

1,014 children attended for refraction, glasses being prescribed for 503 of those examined The Head Teachers were notified of those who were prescribed glasses.

Operative treatment for correction of squint was recommended in 25 cases.

Four blind children are at residential special schools, and two partially sighted children are also in special residential schools.

The school nurses continued to visit schools to give vision tests to children not medically inspected during the previous twelve months and due for examination in the near future. Children who appeared to have defective vision or squint were offered the facilities of the ophthalmic clinics.

ORTHOPTIC CLINIC

A total of 83 sessions were conducted during the year ended 31st December, 1966, at the School Clinic, 78 Norton Road by the Orthoptist, 433 children were given treatment.

NOSE AND THROAT DEFECTS

EAR DISEASES AND DEFECTIVE HEARING

Hearing Aids.

8 children attending maintained schools have hearing aids. Those in attendance at schools in the town are kept under observation by the school nurse and head teachers are informed regarding children for whom hearing aids have been prescribed.

Deaf Children—Special Schools.

11 deaf children attend Middlesbrough School for the Deaf, and 3 children are at residential schools for the deaf.

Pure Tone Audiometer.

Sweep audiometer tests were carried out in Junior Departments, to 28th February, 1966, 175 children were tested, almost all in the nine year old age group. 5 were referred for retests and 5 whose results were still unsatisfactory were referred to the school medical officer.

Sweep audiometer tests were carried out in Infants' Departments, from 1st March, 1966, almost all in the five year old age group, 1,338 children were tested, 83 were referred for retests and of these 7 were satisfactory, 76 were referred to the school medical officer.

Of the 81 examined by the school medical officer, 71 were found to have good hearing, and 10 were referred to their own doctor, for specialist treatment.

24 children were given individual tests, 5 were referred to the school medical officer, 2 were satisfactory, 3 were referred to their own doctor for specialist treatment.

Head teachers are notified of any children who are partially deaf, and who ought to be sitting near the front of the class.

ORTHOPAEDIC AND POSTURAL DEFECTS

Children needing treatment are in most cases referred, through their own doctor, to the Orthopaedic Department at one of the local hospitals.

6 children were treated at Thornaby School Clinic, where there is an out-patient clinic for children discharged from the Adele Shaw Orthopaedic Hospital.

7 physically handicapped children are at Residential Special Schools.

HOME TUITION

No children are receiving home tuition.

EPILEPSY

There are no children attending or awaiting admission to a Special School for Epileptic Children.

SPEECH CLINIC

A total of 24 sessions were conducted during the latter part of the year ending 31st December, 1966, at the Speech Clinic, Nelson Terrace by the Speech Therapist, 67 children were interviewed, 51 children were given treatment.

Cleanliness Inspections.

The total number of head inspections carried out during the year was 57,513 and the number of individual children found to be unclean was 1,600. 529 of these cases were considered serious enough to be asked to report at the clinic.

Ragworth Open Air School.

The school has accommodation for 120 children.

Most of those admitted to the school are of delicate physique, physically handicapped, or suffering from such diseases as anaemia, bronchitis, asthma, rheumatism, heart disease or non-infective tuberculosis, or are convalescent after illness or operation.

During 1966, 17 delicate children, 8 physically handicapped children and 1 epileptic child were admitted to the school.

One of the school medical officers visits the school regularly and examines every child periodically. Those discharged from the school are also kept under observation and if necessary re-admitted. 1 child was re-admitted during the year.

Immunisation against Tuberculosis.

Vaccination against tuberculosis continued during 1966 for school children in the 13 and 14 years old age group.

711 senior children were given mantoux tests, 47 of them having a positive reaction and 615 a negative reaction.

615 of the children with negative reactions were given a B.C.G. vaccination.

1,264 infants were given mantoux tests. 19 of them having a positive reaction and 1,147 a negative reaction.

154 senior boys (contacts of a case of pulmonary tuberculosis) were given mantoux tests, 14 were positive and were sent for X-ray together with 31 who did not attend for reading and 109 were negative.

DENTAL INSPECTION AND TREATMENT.

Attendances and Treatment.

First visit ...	2,132
Subsequent visits...	967
Total visits	3,099
Additional courses of treatment commenced ...	22
Fillings in permanent teeth	1,215
Fillings in deciduous teeth	164
Permanent teeth filled	1,078
Deciduous teeth filled	244
Permanent teeth extracted	695
Deciduous teeth extracted	1,962
General anaesthetics	748
General anaesthetics administered by Dental Officers	—
Emergencies	274
Prophylaxis	240
Teeth otherwise conserved	451
Courses of treatment completed	1,839

Orthodontics.

New cases commenced during year	31
Cases completed during year	9
Cases discontinued during year	2
No. of removable appliances fitted	8
Pupils referred to hospital Consultant	26

Prosthetics.

Pupils supplied with partial dentures	14

Inspections.

First inspection at school. Number of pupils	12,820
Number found to require treatment	5,527
Number offered treatment	5,527
Pupils re-inspected at school clinic	761
Number found to require treatment	312

Sessions.

Sessions devoted to treatment	679
Sessions devoted to inspection	66

EXTRACTS FROM THE ANNUAL REPORT ON THE WORK OF THE CHILD GUIDANCE CLINIC.

Remedial Teaching Staff.

Mrs. Broomfield, Mrs. Cook, Mrs. Clyne, Mrs. Cullinan, Mrs. Dee, Mrs. Fordham, Mrs. Galley, Mrs. Guest, Mrs. Kelman, M.A., Mrs. Metcalfe, Mrs. Moreland, Mrs. McBride, Mrs. Pace, Mrs. Robinson, Mrs. E. Smith, Mrs. Skrebowski, B.Sc., Mrs. Stannage, Mrs. Thompson, Mrs. Usher, B.A. (Resigned Dec., 1966), Mrs. Wright, B.A.

During the year we have co-operated with Probation Officers, Child Care Officers, N.S.P.C.C., Mental Welfare Officers, School Welfare Officers, Youth Employment Officers, Head Teachers and Medical Practitioners.

Junior Training Centre.

This centre continues to supply a need for the child of low intelligence. The premises are attractive, and the children become socialised, make progress, and work happily together.

Mentally Handicapped Pupils (*I.Q.* 70—)

Primrose Hill Day School has a waiting list of twenty-five pupils. Thirty children attend Billingham Day Special School.

ASSESSMENT OF INTELLIGENCE QUOTIENT

TABLE 1.

Re-tests.

I.Q. (—30)		(30—39)		(40—49)		(50—59)		(60—69)		Total.	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
—	—	—	—	4	—	1	1	5	8	10	9

Age Range.

Years.	(2 — 7)		(8—11)		(12—14)		(15+)		Total.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
	2	3	3	1	3	4	2	1	10	9

New cases Tested

I.Q.	(—30)	(30—39)		(40—49)		(50—59)		(60—69)		Total.	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
—	—	—	1	1	4	6	4	9	6	16	15
								Unable to be tested		1	
										17	15
								Total	32		

Age Range.

Years.	(3 — 7)		(8 —11)		(12—14)		(15+)		Total.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
	10	7	5	5	2	1	—	2	17	15
									Total	32
									Complete Total	51

Dull and Backward (*I.Q.* 70-85).

There are so many staff changes now-a-days, that the dull child lacks a stable environment, and becomes confused. Each school should have a small class for slower pupils, taught by someone who is unlikely to leave at short notice.

Play Therapy.

The Play Group has been disbanded for the time being, as all the children have improved. It will be resumed in due course.

ATTENDANCES AT CLINIC.

TABLE 2.

Most of those attending the Clinic regularly come for help with their lessons, and tend to be maladjusted. Some of the children are on probation, while others have unfortunate home backgrounds. We have thirty-six children coming for remedial teaching. Most are from Secondary Modern Schools. One boy is a case of dyslexia, in our opinion, and will continue to attend till he leaves school. He finds reading very difficult, in spite of having average intelligence.

	Reading and Spelling.	Reading Spelling & Arithmetic.	Arithmetic.	Other Subjects.	Discontinued.
Boys	27	—	4	—	12
Girls	2	1	1	1	2
Totals...	29	1	5	1	14

Report on Adjustment Classes.

We have nineteen certificated teachers working in our Remedial Reading Classes, eighteen in Primary Schools, and one in a Secondary Modern School who works with 16 children over eleven years of age. Regular meetings of these teachers are held at the Child Guidance Clinic.

NUMBER OF CHILDREN IN ADJUSTMENT CLASSES

TABLE 3.

Boys.	Girls.	Total.
283	103	386

TABLE 4.

No. of Adjustment Classes.	No. of Weekly Sessions.	Length of Session.	No. of Children in each class.	Total No. of Children.	No. of Schools represented.
42	3	1 hour	6—8	386	23

AMOUNT OF RETARDATION ON ENTRY

TABLE 5.

Amount of Retardation on Entry.

Lowest.	Highest.	Average.
1 year 6 months.	6 years 1 month.	2 years 6 months.

TABLE 6

READING STANDARDS ON ENTRY.

Lowest Reading Age	Highest Reading Age,
Nil	8 years 9 months

RESULTS FOR YEAR 1966

TABLE 7.

Average Improvement after Attendance.	No. of Children.	Least Improvement.	Greatest Improvement.		Average Improvement.		No Improvement.	Returned to Class.	Left District.
			y.	m.	y.	m.			
4+terms	90	1 year 3 m.	5	6	2	3	—	53	5
3+terms	52	5 m.	3	7	2	0	2	16	3
2+terms	50	6 m.	2	7	1	4	5	5	—
1+term	155	4 m.	3	5	1	1	25	—	—
Less than 1 term	31	—	—		—		—	—	—

SECONDARY SCHOOL SELECTION.

In 1964 the Secondary School Selection Examination was a National Foundation for Educational Research examination, comprising papers on English, Arithmetic and Verbal Reasoning. In 1965 children were selected by Teachers' Estimates. After these children had been in Grammar or Selective Schools for a year, Head Teachers were asked to give lists of children who were unlikely to profit from Grammar School or Selective School education.

TABLE 8.

PUPILS MAKING POOR PROGRESS.

	1965	1966
Boys' Grammar Schools	3	7
Girls' Grammar Schools	3	5
Boys' Selective School	4	3
Girls' Selective School	5	1

It will be noted that both the Selection Tests, and Teachers' Estimates were good predictors of later success in schools. It is impossible to estimate exactly, by any method, as so many personality traits, and environmental factors cannot be measured, such as persistence, stability, health of the pupil, efficiency of the Mother, facilities for doing homework, attitude to study in the home and many other factors.

Visits to Schools.

Visits to schools and to Adjustment Classes are made as often as can be arranged, by the Psychologist. Adjustment Class Teachers attend the Clinic from time to time to discuss their work. Regular meetings are held each term.

Visitors to the Clinic.

Many visitors have attended the Clinic including doctors, nurses, students, social workers and parents.

Lectures.

Lectures to various organisations have been given by the staff.

SOCIAL WORKER

Owing to the increased number of children attending the Clinic for therapeutic treatment, the number of home visits has been decreased. The children who have received treatment have shown great improvement in their attitude to life in general. Their state of inertia has changed to more alertness, and in certain cases, although only touching the fringe, it is felt that treatment has prevented a potentiality to delinquency. Several visits have been essential to homes where the parents have been separated or mother has been suffering from neurasthenia. Marital disharmony is certainly a major factor in a disturbed child. More case histories are taken in the Clinic as this proves beneficial to Mother and also Father, if he attends, in talking out their difficulties.

Case Histories	253
Home visits	95
Visits to schools and other agencies	15
Weekly Therapy Cases	22

CONSULTANT PSYCHIATRIST.

Total Number of Consultations (Parents & Children)	360
Number of Consultations (Children)	178
Number of new cases referred during the year	82
Number of follow-up cases	45
Number of cases returned for treatment	51
Number of cases outside the Borough	16

During the past year, the demand on Clinic services has steadily increased and the total number of consultations has increased by approximately 7%. However, even this has not been sufficient to maintain the balance between new consultations and therapeutic attendances, and the new case load has increased by 30%.

Once again, therefore, the constantly increasing demand though partially absorbed by the increase in total number of consultations, has had to be met by a slight reduction in the proportion of therapeutic visits, but even this has failed to make any impression upon the waiting list, which has become further extended. As previously, priority is always given to urgent cases so that, as far as possible, the disadvantages of a long waiting list have been overcome, but there is no doubt that there now exists a demand which is greater than our present Consultant Services fully can meet.

As during the previous year, the number of cases seen from outside the Borough has been held back as far as possible, and even marginally reduced, and there is no doubt at all that here too, if consulting time was available the number of County cases could be increased to an almost unlimited extent.

Sources of Referral to Psychiatrist.

Stockton-on-Tees Borough School Health Service	15
Durham County School Health Service	16
Family Doctors	37
Consultants	8
Juvenile Courts and Probation Officers	6
Schools	22
Parents	23
	127

PSYCHOLOGIST

Sources of Referral

Stockton-on-Tees Borough School Health Service	39
Durham County School Health Service	4
Consultants	16
Medical Practitioners	26
Schools	178
Parents	27
Probation Officers	4
	294

Psychological Record.

(1) *Educational Retardation.*

General backwardness	102
Backwardness in reading	6
Backwardness in Spelling	1
Mentally Defective	51

(2) *Personality Maladjustment.*

General instability	18
Emotional retardation and regression	2
Nightmares	1
Aggression, Temper Tantrums	6
Anxiety, Obsessional States	3

(3) *Habit Disorders.*

Enuresis and soiling	14
Speech defect	11

(4) *Anti-Social Tendencies.*

Probation	2
Unmanageable behaviour	7
Truancy and wandering	1
Theft	9
Non-co-operation	1

(5) *Social Difficulties.*

Strong physical factors	11
Strong home factors	20

(6) *Special Interviews.*

I.Q. and advice	133

Range of Intelligence.

Intelligence Quotient.

		Boys.	*Girls.*	*Total.*
130+	Very Superior Intelligence	5	2	7
116—129	Superior Intelligence	22	4	26
86—115	Average Intelligence	88	29	117
70— 85	Dull and backward	55	38	93
69 and under	Mentally handicapped	26	24	50
	Unable to be tested	1	—	1
		197	97	294

Age Range.

Years.	(3—7)		(8—11)		(12—14)		(15+)		Total	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
	80	40	84	36	26	16	7	5	197	97
	120		120		42		12		294	

Reports.

Durham County School Health Service	42
Schools	361
Borough School Medical Officer	28
School Health Service	58
Consultants	19
Medical Practitioners	150
Probation Officers	12
Other Agencies	7

Interviews.

Parents	476
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